



# EARLY YEARS GRADUATED RESPONSE

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# FOREWORD



**Derbyshire is ambitious for all children and young people and is transforming services for children and young people with the most complex special educational needs and disabilities (SEND) who deserve every opportunity to achieve well and access the very best provision.**

As nationally, and in line with the best inclusive practice, the vast majority of children and young people with additional needs in Derbyshire will have those needs met through the graduated response available in their local mainstream provision. A much smaller proportion will require more specialist settings. Derbyshire has over **16,000** children with identified additional needs who will have their needs met through the inclusive mainstream offer.

The SEND Code of Practice clearly states that, where possible, children and young people should attend mainstream schools in their local area and should be encouraged to feel part of their local community.

Derbyshire has many reasons to be proud of its existing services and the quality of provision, in many mainstream early years settings, whether in the maintained or private, voluntary and independent sector (non-maintained).. However, there is more we need to do to improve outcomes for children with SEND including a reduction of those with autism leaving mainstream environments and the over representation of those with identified needs at SEN support who are excluded or become electively home educated.

The aim of this guidance is to support colleagues in meeting need and to achieve the best outcomes for our young children. It explains the special educational provision expected to be made from within an early years setting's budget; the first crucial circle in the graduated response.



**This document makes explicit the provision for young children requiring support from within educational settings without the necessity for an education, health and care needs assessment and is important because:**

- All Derbyshire children and young people attending an early years setting should have the same entitlement to provision for special educational needs
- Settings and local authority staff need a joint understanding of how best to support individual learners
- It supports the local authority in its statutory duty to monitor and evaluate effectiveness of special educational needs provision
- It provides the considerations to reaching thresholds for access to additional funding or eligibility for an formal assessment of needs.

This guidance sets out the continuum for a range of needs and identifies the types of interventions and support available from universal quality first teaching from all early years practitioners and teachers through to specialist support from services.

It has been developed in co-production with parents/carers, settings/schools, special educational needs coordinators (SENCOs), and a wide range of specialist education, care and health services.

This document provides advice and guidance to help early years providers in the maintained and non-maintained sectors to continue to build and enhance their offer for some of our most vulnerable learners.

I would like to extend my appreciation and thanks to all those who have supported the development of this guidance. The co-production work that has been undertaken to produce this document is testament to our local commitment to achieving the best of our children and young people.

**Paula Williams**  
Assistant Director: Learning Access and Inclusion





# OUR VISION

**Our vision** is that **all children and young people** with SEND will be **empowered to make choices which lead to fulfilled lives** where they are included in their local community socially, access meaningful employment, are **physically and emotionally healthy and live as independently as possible.**



# THE SPECIAL EDUCATIONAL NEEDS AND DISABILITY CODE OF PRACTICE: 0-25 YEARS (2015)

In developing this guidance, consideration has been given to the principles and processes outlined in “The Special Educational Needs and Disability Code of Practice: 0-25 Years (2015)”. This document should be used as a key reference in supporting and developing provision for children and young people identified as having a Special Educational Need or Disability (SEND).

*It is particularly important in the early years that there is no delay in making any necessary special educational provision. Delay at this stage can give rise to learning difficulty and subsequently to loss of self-esteem, frustration in learning and to behaviour difficulties. Early action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for adult life.*

*Where a setting identifies a child as having SEN they **must** work in partnership with parents to establish the support the child needs.*

*Where a setting makes special educational provision for a child with SEN they should inform the parents and a maintained nursery school **must** inform the parents. All settings should adopt a graduated approach with four stages of action: assess, plan, do and review.*

*(COP, 2015: 5.36-5.38)*

*Providers **must** have arrangements in place to support children with SEN or disabilities. These arrangements should include a clear approach to identifying and responding to SEN. The benefits of early identification are widely recognised – identifying need at the earliest point, and then making effective provision, improves long-term outcomes for children.*

*All those who work with young children should be alert to emerging difficulties and respond early. In particular, parents know their children best and it is important that all practitioners listen and understand when parents express concerns about their child’s development.*

*(COP, 2015: 5.4 & 5.5)*



# WHAT IS A GRADUATED RESPONSE?

**The Graduated Response is far more than this document. It is a journey. This document is a step along that journey. An embedded graduated response is rooted in the bigger picture of inclusion.**

Inclusive education means different and diverse students learning side by side in the same room. Inclusive education values diversity and the unique contributions each child brings. In a truly inclusive setting, every child feels safe and has a sense of belonging. Children and their parents and carers participate in setting learning goals and take part in decisions that affect them. Setting staff have the training, support, flexibility, and resources to nurture, encourage, and respond to the needs of all children.

Central to an embedded graduated response is that the service and support develops around the individual, rather than the individual slotting into the service.

Implementation of the graduated response enables early identification and a clear understanding of each individual's needs within their setting community. This includes consideration of the individual's life from their viewpoint and discovering with them what their needs are rather than assessing them from the outside. Getting this process right will reveal their strengths, vulnerabilities, skills, aspirations, and preferences including what resources the individual can contribute, as well as the contribution available from informal support such as their family, friendship and community network.





# A GRADUATED RESPONSE STARTS WITH A WHOLE SETTING APPROACH TO INCLUSION

Effective leadership, management, supervisions and key person arrangements together with robust policies in settings can help meet children's needs.

Quality First Teaching (QFT) will help a setting to meet the learning needs of all its children. Settings should not automatically assume that a child's learning difficulties result solely or even mainly from problems within the child or their environment.

The setting's practice can make a difference. The manager and SENCO should be alert to any particular pattern in the emergence of children's special educational needs or parents' expressions of concern and should reflect on the setting's general practices and policies in the light of any such patterns. Regular and robust monitoring of outcomes for children with SEND will support this reflective process.

## OTHER RISK FACTORS

A delay in learning and development in the early years may or may not indicate that a child has SEN, that is, that they have a learning difficulty or disability that calls for special educational provision. Equally, difficult or withdrawn behaviour does not necessarily mean that a child has SEN. However, where there are concerns, there should be an assessment to determine whether there are any causal factors such as an underlying learning or communication difficulty. If it is thought housing, family or other domestic circumstances may be contributing to the presenting behaviour, a multi-agency approach, supported by the use of approaches such as the Early Help Assessment, should be adopted.

(COP, 2015: 5.29)



# WHOLE SETTING APPROACH

## IDENTIFYING NEED

### INITIAL CONCERNS

Support for children at “Initial Concerns” levels is where, despite good QFT, including structured and responsive early years provision, there is a possible emerging need due to ongoing concerns. Support should be tailored to the needs of the individual child. Monitoring and reviewing progress will be vital at this level to identify whether or not the child or young person has SEND.

*Where a child appears to be behind expected levels, or where a child's progress gives cause for concern, practitioners should consider all the information about the child's learning and development from within and beyond the setting, from formal checks, from practitioner observations and from any more detailed assessment of the child's needs.*

*From within the setting practitioners should particularly consider information on a child's progress in communication and language, physical development and personal, social and emotional development. Where any specialist advice has been sought from beyond the setting, this should also inform decisions about whether or not a child has SEN. All the information should be brought together with the observations of parents and considered with them. (COP, 2015: 5.28)*

### SEN SUPPORT (TARGETED AND SPECIALIST)

SEN Support for each child will be different because it is designed to meet the needs of that particular child. It should be set out in a plan and include the actions and approach needed to help the child make expected progress. This process should follow the “Assess, Plan, Do, Review” cycle.

#### **SEN Support could include, for example:**

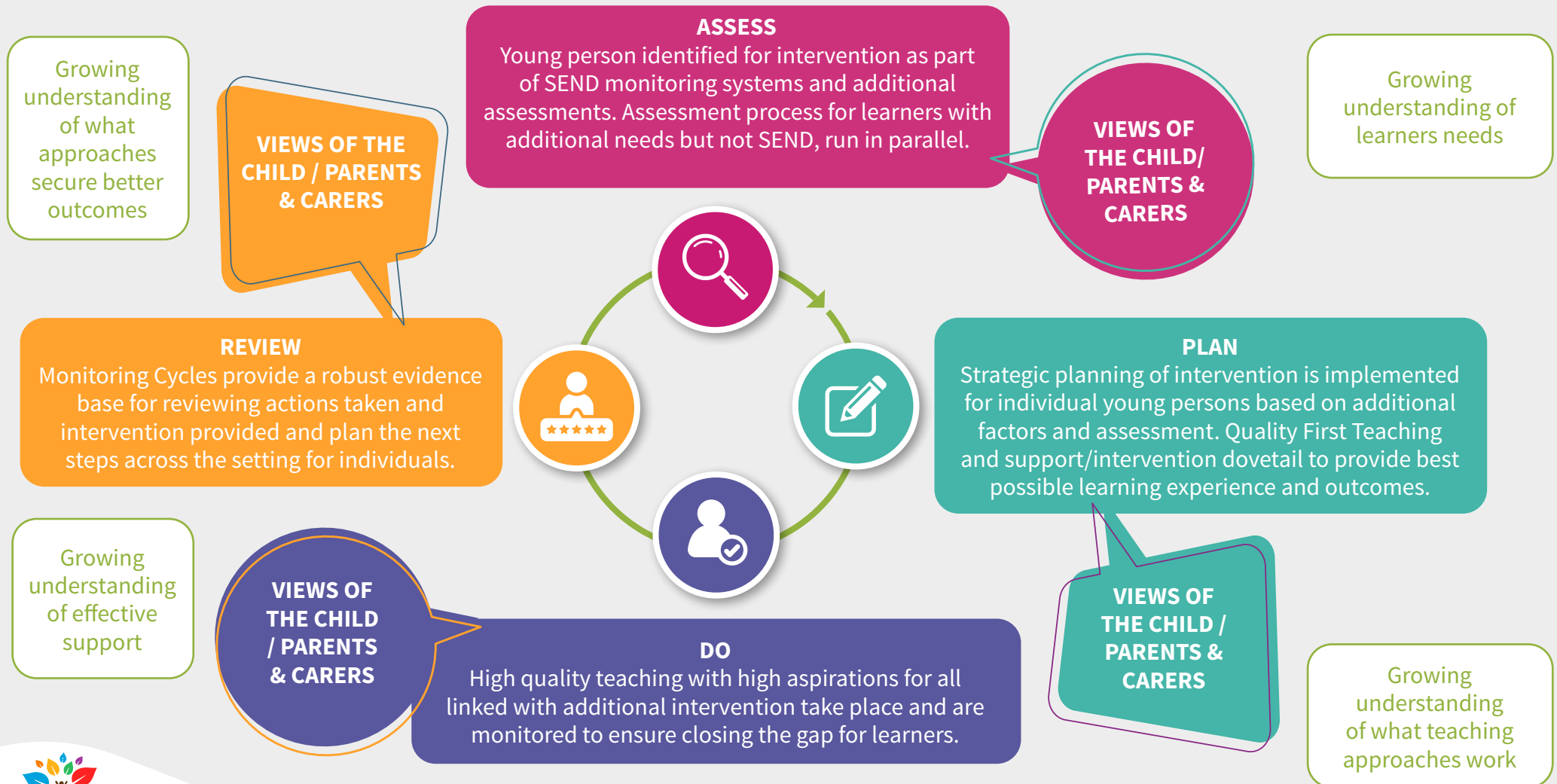
- Additional materials and/or equipment
- Interventions or programmes for the individual child
- Interventions in small groups
- One to one focused activities with a key adult or setting SENCO
- Help for a child to join in group activities or interact with other children
- Advice and support from other professionals for the setting staff, this could be a specialist teacher, an educational psychologist or a speech and language therapist.



# SEN SUPPORT

## ASSESS, PLAN, DO, REVIEW CYCLE

Where a child is identified as having SEND, schools and settings should take action to remove barriers to learning and put effective special educational provision in place. This SEN support should take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the child/young person's needs and of what supports the child in making good progress and securing good outcomes.



# PREPARATION FOR ADULTHOOD

## **Preparation for Adulthood begins in the Early Years.**

It is important to constantly keep in mind how the work we do to support children and young people is about preparing them for their future. Preparation for Adulthood (PfA) is an approach that keeps the child or young person at the centre of our work. It values their hopes, aspirations and ambitions from early years to adulthood.

The PfA approach looks at outcomes and focusses on the child or young person to steer and drive the provision that needs to be put in place to support their aspirations.

More information about how to implement support from Early Years right through to Post 16 can be found by visiting the DfE funded Preparing for adulthood website.



**EMPLOYMENT**

**INDEPENDENT  
LIVING**

**FRIENDS,  
RELATIONSHIPS  
AND COMMUNITY**

**GOOD  
HEALTH**

# A NOTE ON SENSORY PROCESSING...

## WHAT IS SENSORY PROCESSING?

Our brain receives information from all of our senses including our sight, hearing, touch, smell, taste, proprioception (using our muscles to understand where our body is in space) and vestibular (the sense of how the body moves against gravity). We use this information so we can respond to the world around us. Learning how to process information from our senses, can be challenging for all of us at times, but more challenging for some children. Some children may be over responsive and/ or under responsive to the information they get from their senses.

## WHAT DIFFERENCE DOES IT MAKE?

When a child or young person is over and/or under responsive to the information from their senses, this may affect their behaviour, their learning, their emotional response and social interaction. The impact of these differences could be evident in any of the four areas of need. Sometimes it helps us to understand why a child behaves, learns or responds as they do, by considering their sensory processing. It can help to understand why a child reacts to certain things (e.g. sensitivity to clothing). These responses are often seen in autistic children and young people as well as those with Attention Deficit Hyperactivity Disorder (ADHD), Attachment Disorder, Cerebral Palsy and developmental coordination disorders.

In Derbyshire we have developed a graduated approach to support for children and young people based on best practice and available evidence from health, education and social care professionals.

This includes front line practitioners (early years, nursery & school staff) working with families to identify and address sensory processing needs at home and in the classroom using the “Derbyshire Sensory Processing Needs Toolkit” at an early stage. Additional support can also be drawn from “sensory champions” Currently, sensory champions are primarily situated within Children’s Services support services. All of the information about this can be found on the Local Offer.



# THE WHOLE SETTING APPROACH

## STRUCTURE OF THE GUIDANCE

THIS GUIDANCE IS SPLIT INTO THE **FOUR** CATEGORIES OF NEED:

**1**

**COMMUNICATION  
AND  
INTERACTION**

**2**

**COGNITION  
AND  
LEARNING**

**3**

**SOCIAL,  
EMOTIONAL AND  
MENTAL HEALTH**

**4**

**SENSORY  
AND/OR  
PHYSICAL NEEDS**

EACH OF THE AREAS OF NEED ARE SPLIT INTO THE FOLLOWING FORMAT

### ASSESS –

#### DESCRIPTION OF NEED

This section describes the things that may be noticed/identified about the child

### PLAN AND DO –

#### DESCRIPTION OF PROVISION

This section describes the interventions and strategies to be used at the three different levels of support; universal, targeted and specialist.

### REVIEW

This section describes how to effectively review the interventions and strategies at the three different levels of support; universal, targeted and specialist.

- The range, type and intensity should not be a fixed state but should change according to the progress the child makes over time.
- When reading the descriptors it is important to bear in mind that a child may display some or all of the difficulties stated at each level of need.
- The descriptors are not an exhaustive list.
- Setting staff may wish to read this guidance as a complete document. However, each section is designed to 'stand alone' to be referred to alongside this general introduction.

Descriptors relating to a child or young person's needs and descriptors relating to provision are split into three areas to represent a graduation:



**Quality First  
Teaching/Universal**



**Targeted  
Support**

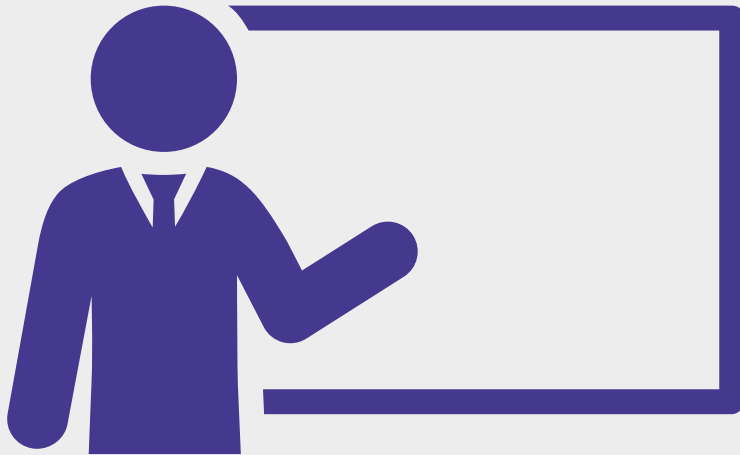


**Specialist  
Support**



# REASONABLE ADJUSTMENTS

Support is about making ‘reasonable adjustments’ and doing things a bit differently. It can include having a safe place/quiet room where the child can go, or carefully choosing where a child is positioned for activities, extra help or specialist equipment, and may also include making financial commitments.



 	 	  Dawid has ear defenders to wear when the room is noisy	 
  Sara needs to be shown objects of reference to help her follow the routines	 	 	  Mayar has a specialist chair to sit in for table top activities
 	  Noah has some planned movement time before being given an adult directed activity to concentrate on	 	  Jaiden has an adult sit with him showing him toys/objects connected with the story during carpet time

## DERBYSHIRE LOCAL OFFER

The expectations of the Graduated Response are a key part of the larger Local Offer for learning.

Links to resources and local services can be found here.

Derbyshire Local Offer



# INTRODUCTION TO THE EARLY YEARS FOUNDATION STAGE SEN GRADUATED RESPONSE

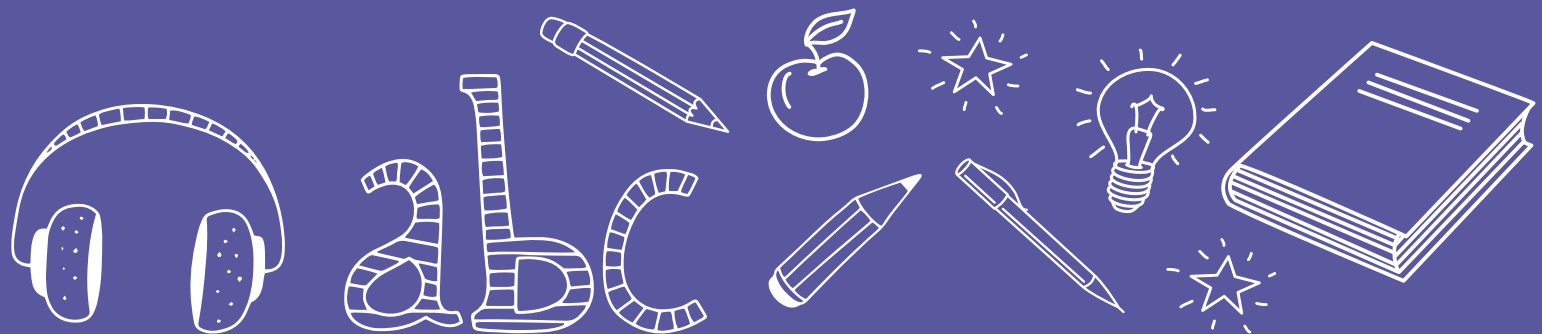
**This document is intended for use throughout the Early Years Foundation Stage, including from nursery to the end of Reception\***

The SEND code of practice describes a graduated response to meeting the needs of children with SEN. The information contained in section 5 of the SEND code of practice is relevant to early years.

The Graduated Response to Early Years is for children up to the end of their reception year in school and it should be read alongside the Early Years Descriptors, it aims to provide guidance on a clear approach to identifying and responding to children with SEND.

The Early Years SEN Descriptors (EYD) should be used alongside this document and can be found on the Derbyshire County Council website and on the Derbyshire Local Offer.

Most children will be able to participate in a mainstream setting and make progress through high quality provision which includes effective differentiation, known as Quality First Teaching (QFT). This means the use of appropriately planned, quality experiences and provision, built on observations of children's starting points and interests to develop their learning. Sensitive interactions are essential to support this. Making higher quality teaching normally available to everyone in a setting is likely to mean that fewer children will require additional and different support.







Children who may be achieving at levels just below typical development will generally be identified by using development matters checkpoints. Minor environmental and/or curriculum adaptations from within the school or setting's own resources can form part of Universal provision. Development Matters in the EYFS gives detailed guidance on what practitioners can do and provide to reduce barriers to inclusion.

Early learning goals summarise the knowledge, skills and understanding that young children should acquire in their learning by the end of reception.

The EYDs set out the provision that settings should make when children need additional support to achieve the development matters checkpoints. That is, at Targeted level.

If the child does not make progress despite this intervention practitioners should consider involving appropriate support services, that is moving the child to Specialist levels. The decision to involve support services should be taken with the child's parents.

Where, despite a setting having taken relevant and purposeful action to identify, assess and meet the needs of a child, and the child has not made good progress, the SEND code of practice suggests that the setting should consider requesting an Education, Health and Care Needs Assessment.

At each stage of support the graduated response demands an ASSESS, PLAN, DO, REVIEW model be adhered to.

It is important to remember that all children develop at varying rates, particularly in the early years. There will be many typically developing children who may not be at their chronological age level in some steps and this will not be a cause for concern

*\*“The Reception Year holds a unique and important position in education. It marks a significant milestone in a child’s life, representing both a beginning and an end. For parents, it is the end of early education and care, at home and/or across multiple settings, and the start of school. For school leaders and teachers, it is the crucial bridge between the EYFS and, for most schools, the start of the national curriculum.”*

*The term ‘Reception’ refers to leaders and staff ‘receiving’ children into their school. While many children will have already had some form of preschool provision, the Reception Year is often their first experience of full-time education. It is a time when leaders and staff establish the rules, routines and expectations of learning that will serve children well and follow them through the rest of their formal schooling.”*

Bold Beginnings (OFSTED) 2017





# COMMUNICATION AND INTERACTION

# INTRODUCTION

**A graduated response will involve using knowledge of the child to create hypotheses. Then explore what strategies will help the child thrive. The following are minimum guides in relation to the SEND code of practice.**

Communication and interaction in the early years involves a range of skills such as:

- speaking fluently and gesturing to be understood,
- understanding others,
- noticing and using non-verbal communication,
- maintaining topics of shared attention.

All children have early childhood experiences shaping their emotional, behavioural and social skills. These experiences inform what children communicate about and why. Some children have specific developmental needs that impact on communication. A few children's communication development is influenced by general learning or cognitive needs.

Many children will naturally progress in all areas of communication and interaction. Some children will need a short time of support and a few will need long-term support. A child's need can be solely communication and interaction or co-occur with other diagnoses, syndromes, conditions or medical needs.

Early identification is a priority. In Derbyshire, we review all young children's speech, language and communication skills before school age. Health Visitors observe child development at each contact. The parents talk with Health Visitors and settings to complete the integrated 2-year review. Assessment and intervention are also available through Children's Centres for targeted families. Children with complex or severe needs follow the appropriate care and education pathway. This may include further assessment or Education, health and care needs assessment.

Concerns and questions are not restricted to an age or stage. It is therefore important that practitioners are aware of milestones and assessment options as outlined below. Not all children with speech, language and communication needs are children with SEND. Many will have short term needs met at the universal or early targeted level.

## **ENGLISH AND OTHER LANGUAGES**

Learning more than one language does not mean there is a speech, language and communication need. Practitioners should establish an understanding of the child's skills in their first language. This is done with observations, cultural knowledge and speaking with parents/carers. Targeted support may be suitable if developmental gaps or difficulties are found. Do not assume this is a child with SEND.



# OVERVIEW

In this section, you will find information about the following;

- 1. SPEECH AND LANGUAGE**
- 2. INTERACTION AND SOCIAL COMMUNICATION INCLUDING ASD**
- 3. GRADUATED RESPONSE INDICATORS**

## TERMS OF REFERENCE

Any reference to early years settings includes:

- Maintained nursery schools
- Maintained nursery classes (as part of an Infant and nursery class or primary school)
- Reception classes in a primary school
- Private, voluntary, independent providers

This document is intended for use throughout the Early Years Foundation Stage (EYFS), including from nursery to the end of reception\*.

## THE SEND CODE OF PRACTICE 2015 SAYS;

### EARLY YEARS

**5.36** *It is particularly important in the early years that there is no delay in making any necessary special educational provision. Delay at this stage can give rise to learning difficulty and subsequently to loss of self-esteem, frustration in learning and to behaviour difficulties. Early action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for adult life.*

**6.28** *Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.*

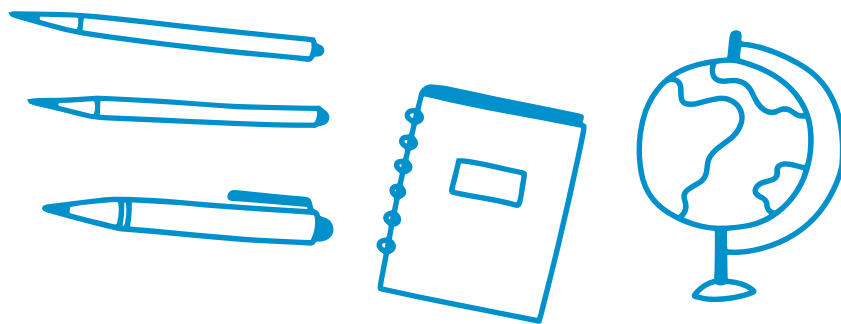
**6.29** *Children and young people with ASD, including Asperger's Syndrome and Autism, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others.*



## SPEECH AND LANGUAGE NEEDS

**Understanding of language and use of memory is vital for linking meaning to words, developing concepts, accurate interpretation of non-verbal communication and literal/non-literal meaning in communication and later reading.**

At different stages children will have a variety of strengths and weaknesses in their expressive language (talking and gestures) development. Some children use a lot of gesture whilst others are quick to use verbal words. It is typical for children to reduce the reliance on gestures as their verbal language expands, however gestures remain an integral part of communication especially in the early years. Speech is the ability to recognise, store, recall and form speech sounds with accuracy and in correct sequence to form words. This is a complex process of learning and maturation that most children achieve by being immersed in communication and interaction.





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL



### ASSESS DESCRIPTION OF NEED

As outlined in the Early Years Foundation Stage, needs can be identified through observation of children's communication. Observation includes actions, emotions and words when interacting with children and adults, just children or solo. It is also important to use family knowledge and experience.

The 'integrated 2-year review' is so vital for all children. It identifies opportunities for early help or intervention. Together the parents, Health Visitors and key workers share knowledge of the child to complete the review. This brings together the health development review and the EYFS progress check.

Observational assessment of the following abilities will help practitioners identify speech and language needs when used alongside the Universally Speaking 0-5 guidance.

- Abilities to listen and respond to sounds and spoken words.
- Abilities to develop and maintain attention skills.
- Abilities to understand situations.
- Abilities to meaningfully use sounds and words.
- Abilities to learn, understand, use and recall new words (vocabulary learning).
- Abilities to learn, remember and recall details of daily life, routines and stories.
- Abilities to understand and use spoken language and instructions, including confidence to be expressive with a range of people.





- Abilities to express ideas fluently and in sequence.
- Abilities to speak fluently (or evidence of stammering).
- Abilities to understand and use sentences with developmentally appropriate grammar.
- Abilities to make and use a range of speech sounds.
- Abilities to use speech sounds in words and sentences with increasing accuracy.
- Abilities to use volume, speed and pitch changes with spoken sounds and words.

See indicators grid (Communication and Interaction section 3) for observation considerations for speech, receptive language, expressive language, communication and interaction.





## PLAN AND DO DESCRIPTORS OF PROVISION



- Provide access to whole setting training, particularly in terms of stages of typical language development or speech and language needs.
- Follow the guidance and expectations from EYFS and Development Matters, prioritising the prime areas of learning.
- Give plenty of time for the child to express themselves.
- Use consistent routines, language, visual images/symbols, gestures and expectations of behaviour across the whole setting to help with prediction, anticipation and understanding.
- Teach learning behaviours alongside behaviour management as well as consistency of selected approaches. Ideas are outlined in the Education Endowment Fund (EEF) report – guidance to improving behaviour in school which can be found on their website.
- Take time to explain changes to events or routines e.g. a change in sequence, a new event like a trip out, a change of staff. This explanation will support understanding, reduce anxieties and increase attention skills.
- Adults should prioritise responsive interactions by following the children’s lead. In these interactions the adults will be good communication partners demonstrating listening, reflecting, responding, joint play and co-operation.
- Implement the ECaT or EYPDP strategies for communication friendly settings and supporting speech development with phonological awareness activities rather than correct speech directly. Details can be found on the Derbyshire County Council website or by contacting the Early Years Quality team.
- Don’t pretend you have understood when a child is unclear because of speech or difficulties with logical sequencing of ideas. Support the child to find other ways to share their message.
- Explicitly teach key vocabulary including pre-teaching concepts.
- Adults should talk to the children about how the new learning and ideas within the children’s play is connected to previous learning. This will help develop attention, understanding, memory and self-expression.







Action the following guidance from the Derbyshire EY descriptors:

- SLCN p56 points 1, 4-6: Attention and Listening.
- SLCN p57 points 2-6: Understanding.
- SLCN p58 points 2-3: Expression.
- SLCN p58 points 2-3: Speech and fluency.
- SLCN p59 points 1, 3: managing expectations, wellbeing.



## REVIEWING PROGRESS

- Evaluate progress through an ongoing cycle of Assess, Plan, Do and Review. Participation of setting staff, child and parents/carers should be included in the four-part cycle.
- Reviews should be held regularly and at least twice a year. Reviews should be person-centred in order that children and families can discuss learning and agree appropriate provision.





# SEN SUPPORT TARGETED SUPPORT



## ASSESS DESCRIPTION OF NEED

**After observations and interactions at Universal level, needs may be emergent.**

Plan for focused interactions to support the observations. For example, experiment with how a child responds to proximity of an adult or peers in play. Or give simple instructions within role play to check understanding or listening.

Some children will need targeted assessment and explicit teaching to help bridge the gap between them and their peers in:

- Understanding spoken language.
- Processing spoken language at an effective rate.
- Understanding non-literal language in conversation and text (being read to).
- Having ideas and sharing these in logical order.
- Using language for planning.

- Building and using sentences including grammar.
- Fluency of expression or stammering.
- Vocabulary learning and recall. May experience word finding difficulties.
- Using language and communication to influence others. May be anxious about speaking in some situations (selective mutism).
- Using oral sounds for meaning.
- Using spoken words and multi-syllabic words.
- Being understood by adults and peers when speaking.
- Accessing targeted phonics.
- Using appropriate volume, speed or pitch of voice. May have specific voice quality issues.



Practitioners and parents/carers should use their ongoing knowledge of the child's communication and interaction skills to inform the plan. Focusing on needs rather than solely on a diagnostic label will help guide practitioners and parents/carers to identify the child's [1] barriers, [2] aspirations, [3] access and [4] change capacity to communication and interaction.

See indicators grid (Communication and Interaction section 3) for observation considerations for speech, receptive language, expressive language, communication and interaction.





## PLAN AND DO DESCRIPTORS OF PROVISION



### **In addition to the universal level recommendations, the provision will also need to target:**

- High quality teaching with communication and interaction at the heart: EEF report on mainstream and SEND gives 5 recommendations that can be especially focused for communication and interaction needs [1] a variety of scaffolding that is tiered to changes in needs, circumstance and competence, [2] explicit instruction that is supportive of vocabulary, understanding and processing, [3] sensitive use of technology that enhances communication with peers and adults, [4] using cognitive and metacognitive strategies to empower the learners and [5] flexible grouping for mixed communication and interaction opportunities (involves preparation for children with individual needs or communication aids).
- Ensure planning shows differentiation to meet the needs of the individual. This should reflect advice from any external professional and should be embedded consistently throughout the provision.
- Intervention programmes should be delivered by or under the direction of appropriately trained and experienced staff. The SENCO should monitor the provision. Ensure timetabling allows for the required interventions to be implemented consistently.

- The environment should be organised to ensure it is conducive to developing key skills such as listening and attention. Support the child or young person to carefully manage transition points.
- Follow the selective mutism pathway guidance available on the Derbyshire Local Offer
- Follow the practice guidance from the specialist charities and organisations appropriate to the children's needs. A list of recommended organisations is given in the 'resource' section below.

Action the following guidance from the Derbyshire EY descriptors:

- SLCN p56 points 2-3, 7: Attention and Listening.
- SLCN p57 points 2, 8-10: Understanding.
- SLCN p58 points 4-6: Expression.
- SLCN p58 points 1, 4: Speech and fluency.
- SLCN p59 points 2, 4-5: managing expectations, wellbeing.





## REVIEWING PROGRESS

- Progress towards meeting planned outcomes should be tracked and reviewed regularly, at least termly.
- Parents/carers should always be invited to a review of the child's progress. The views or 'voice of the child' should be actively sought.
- Recent assessment information is used to gain a better understanding of individual children's learning level and to identify the barriers to their learning in the provision.
- Monitor child's progress towards individualised targets. These should be regularly assessed, tracked, monitored and evaluated. An ongoing record of assessment, intervention and evaluation is kept and regularly updated, e.g. My SEND Learning Programme.





# SEN SUPPORT

## SPECIALIST SUPPORT



## ASSESS DESCRIPTION OF NEED

**After focused interactions and hypothesis testing at Targeted level, some needs may be persistent. Practitioners and parents/carers may identify complex and severe communication and interaction needs. These persistent needs will require further investigation including specialist professional assessment e.g. Speech and Language Therapy, Education Psychology.**

Use the Derbyshire small steps profiles following the given guidance.

A few children will require specialist assessment and approaches to progress and access:

- Understanding spoken language including abstract ideas and a reliance on visual support.
- Processing spoken language at moderate-slow speeds.
- Opportunities to share ideas and interests using verbal and non-verbal means including alternative tools e.g. communication aids, as needed.
- Sustained focus especially in social learning situations.
- Meaningful self-expression and social impacts.
- Sequences or sequenced steps of learning.
- Language for functional memory and recall.
- Persistent stammering.
- Persistent selective mutism.
- Oral sequencing skills.
- Oral co-ordination or strength of muscles for speech and/or eating.





- Decoding and storing spoken words into sounds.
- Recalling and recoding speech sounds into words.
- Being successfully understood by others.
- Use of volume, speed or pitch. May have voice disorder.

See indicators grid (Communication and Interaction section 3) for observation considerations for speech, receptive language, expressive language, communication and interaction.





## PLAN AND DO DESCRIPTORS OF PROVISION



### **In addition to the targeted level recommendations, the provision will also need to implement and access:**

- Seek advice, with parental permission, from specialists where expected progress is not made, despite good Quality First Teaching and targeted support.
- Regularly action, review and update children's targets in liaison with specialists.
- Work with parents and carers including invitation to meetings, information sharing and aspirations for the child.
- The child has access to additional targeted teaching in small groups or individually. This should be implemented frequently by setting staff in line with specialist advice.
- Access to augmentative and alternative communication (AAC) strategies may be required such as Makaton, electronic aids and communication books. The type and suitability of AAC should be discussed between the setting, home and specialists.

Action the following guidance from the Derbyshire EY descriptors:

- SLCN p56 point 7: Attention and Listening.
- SLCN p57 points 1, 10: Understanding.
- SLCN p58 points 1, 6: Expression.
- SLCN p59 points 6: managing expectations, wellbeing.







## REVIEWING PROGRESS

- The SEND code of practice (2015) states that where a child does not make sufficient progress through the usual approaches to teaching and learning, staff should decide on 'additional to' or 'different from' interventions.
- Continued monitoring of child progress towards an individualised SEN support plan. These should be regularly assessed, tracked, monitored and evaluated.
- Regular reviews, ideally on a termly basis and involving parents and the child (where applicable). The review should focus on progress, effectiveness of strategies, the impact of any previous interventions, new information or factors and the setting of new targets.
- An ongoing record of assessment, intervention and evaluation is kept and regularly updated, e.g. My SEND Learning Programme.



# INTERACTION AND SOCIAL COMMUNICATION INCLUDING ASD

**Communication is the creation, sending, receiving and responding to messages in a variety of situations.**

It involves using social skills, interactions, interpreting and use of non-verbal expressions, awareness of others and understanding the meaning and purpose of what is being shared. You will be observing and considering children's:

1. Communication and interaction
2. Social understanding and relationships
3. Sensory processing
4. Interests, routines and processing
5. Emotional understanding and self-awareness
6. Learning and engagement
7. Healthy living
8. Independence and community participation

**Use these key questions to guide your assessments at all support levels:**

1. How do you know what the child is feeling?  
Thinking? What they want or need?
2. What helps the child to understand the world around them?  
Words? Pictures? Gestures or signs? Everyday routines?
3. Which people are important to the child? How do they respond to the presence of familiar and unfamiliar people? Other children? Groups of people?
4. What are the child's key strengths and preferences? How do they cope with change in routine? How does the child manage transition, e.g. in and out of the setting?
5. What emotions does the child express? How does the child express strong emotions? What helps the child to calm if they are distressed or over-stimulated?
6. How does the child respond to the physical environment? What resources do they prefer? How does the child respond to routines suggested by adults?
7. How much support does the child need with personal care? What support does the child need with toileting? Hygiene? Dressing? Feeding?
8. Can the child act in a way that is safe according to the environment? What are the risks for the child in the setting?





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL



## ASSESS DESCRIPTION OF NEED

**Children with SEND will develop, grow, change and respond differently at each stage of life. A child may show suggestive traits of communication and interaction needs. It is vital that practitioners avoid incorrect, premature or casual labelling e.g. 'autism'. This is especially important when there is no confirmed medical diagnosis.**

Observational assessment of the following abilities will help practitioners identify interaction and social communication needs when used alongside the Observation Profile from The Autism Education Trust (AET).

- Abilities to look at and notice the shared focal point, people and activity.
- Abilities to notice and adapt to non-verbal communication.

- Abilities to share spaces, objects and people.
- Abilities to use parallel, shared and joint play.
- Abilities to take turns.
- Abilities to use spoken language to start or maintain interactions.
- Abilities to recognise feelings of self and others.
- Abilities to manage intense communication moments.
- See indicators grid (Communication and Interaction section 3) for observation considerations for speech, receptive language, expressive language, communication and interaction.





## PLAN AND DO DESCRIPTORS OF PROVISION

- Refer to the 'Plan/Do' recommendations in the Speech and Language section above to create communication supportive provision.
- Provide access to whole setting training, particularly in terms of social skills development or autism awareness.
- Children with communication and interaction needs will benefit from predictive learning structures that create a 'safe' communication environment.
- When appropriate, adults can scaffold the child's role in play and interactions. The adults should demonstrate and explain the expectations of social behaviour as well as the task.
- Use positive 'can do' instructions rather than what not to do.
- Provide instructions one step at a time. Check or observe understanding.
- Use of visual supports to develop independence and to teach about change e.g. picture timetables, task sequencing.
- Refer to the Derbyshire approach to sensory processing needs to support an audit of the setting environment. The Sensory Processing Needs materials are available on the Derbyshire Local Offer.

Action the following guidance from the Derbyshire EY descriptors:

- Autism and social communication p10-13



## REVIEWING PROGRESS

Setting staff should provide regular reviews of each child's progress in communication with the parent/carer. This should follow the EYFS guidance.





# SEN SUPPORT

## TARGETED SUPPORT



## ASSESS DESCRIPTION OF NEED

**Some children will need targeted assessment and explicit teaching to help them succeed in:**

- Gaining shared attention/ focus.
- Understanding non-verbal communications.
- Understanding and accessing shared thinking.
- Accessing and maintaining periods of shared or joint play.
- Using language to build friendships or relationships with others.
- Social learning with peers and learning from examples.
- Offering and/or following ideas in play especially sequenced ideas.
- See indicators grid (Communication and Interaction section 3) for observation considerations for speech, receptive language, expressive language, communication and interaction





## PLAN AND DO DESCRIPTORS OF PROVISION

**In addition to the universal level recommendations, the provision will also need to target:**

- Strategies that teach co-operation, social interactions, building self-esteem. Provide enhanced opportunities for practise.
- Ensure transitions are carefully planned for and supported.
- Maintain or enhance learning materials which support understanding of the environment, tasks, events and choices e.g. picture timetables, picture instructions, choice boards, now/next, colour coding or transition objects.
- Provide opportunities for overlearning. Pre-teach and re-teach key concepts and vocabulary including processes e.g. 'explore', 'fetch', 'collect', 'investigate'.

Action the following guidance from the Derbyshire EY descriptors:

- Autism and social communication p10-13.



## REVIEWING PROGRESS

**Some children or young people may require extra interventions and support approaches additional to those provided within universal provision**

- The SEND code of practice suggests that the progress towards meeting planned outcomes should be tracked and reviewed regularly, at least termly.
- Parents/carers should always be invited to a review of the child's progress. The views or 'voice of the child' should be actively sought.
- Recent assessment information is used to gain a better understanding of individual children's learning levels and to identify the barriers to their learning in the provision.
- Targets should be regularly assessed, tracked, monitored and evaluated.
- An ongoing record of assessment, intervention and evaluation is kept and regularly updated, e.g. My SEND Learning Programme.





# SEN SUPPORT

## SPECIALIST SUPPORT



## ASSESS DESCRIPTION OF NEED

**Use the Derbyshire social communication small steps profile following the given guidance.**

A few children will require specialist assessment and approaches to progress and access:

- Communicating with others.
- Using language to connect with others.
- Becoming aware of others' interests.
- Understanding social rules of interactions.
- Managing responses to unstructured activity (self-regulation).
- Opportunities for social learning.
- Maintaining positive relationships.

See indicators grid (Communication and Interaction section 3) for observation considerations for speech, receptive language, expressive language, communication and interaction.





## PLAN AND DO DESCRIPTORS OF PROVISION

**In addition to the targeted level recommendations, the provision will also need to implement and access:**

- Specific tools may be suggested by the specialist team around the child e.g. TEACCH,
- Augmentative and alternative communications (AAC) may be required. Some children may be using low-tech systems such as Picture Exchange Communications Systems (PECS) or symbols/signs and other children may be using hi-tech such as specified apps on an iPad. Please consult with the Speech and Language Therapist or specialist teacher for advice and training in these communication aids.
- Use an Intensive Interaction approach to build early relationship and communication skills. Please consult with the Speech and Language Therapist or specialist teacher for advice and training.
- The 'Early Years Autism Competency Framework' will help you create best practice for communication supportive environments. This is available on the AET website.



## REVIEWING PROGRESS

**The SEND code of practice (2015) states that where a child does not make sufficient progress through the usual approaches to teaching and learning, staff should decide on 'additional to' or 'different from' interventions.**

- Continued monitoring of the child's progress towards an individualised SEN support plan. This should be regularly assessed, tracked, monitored and evaluated.
- Regular reviews, ideally on a termly basis and involving parents and the child (where applicable). The review should focus on progress, effectiveness of strategies, the impact of any previous interventions, new information or factors and the setting of new targets.
- An ongoing record of assessment, intervention and evaluation is kept and regularly updated, e.g. My SEND Learning Programme.





# GRADUATED RESPONSE INDICATORS

In this section, you will find information about the following;

## **SPEECH DEVELOPMENT INDICATORS**

Speech is the ability to recognise, store, recall and form speech sounds with accuracy and in correct sequence to form words. This is a complex process of learning and maturation that most children achieve by being immersed in communication and interaction.

## **LANGUAGE DEVELOPMENT INDICATORS RECEPTIVE**

Understanding of language and use of memory is vital for linking meaning to words, developing concepts, accurate interpretation of non-verbal communication and literal/non-literal meaning in communication and later reading.

## **LANGUAGE DEVELOPMENT INDICATORS EXPRESSIVE**

At different stages children will have a variety of strengths and weaknesses in their expressive language (talking and gestures) development. Some children use a lot of gesture whilst others are quick to use verbal words. It is typical for children to reduce the reliance on gestures as their verbal language expands, however gestures remain an integral part of communication especially in the early years.

## **COMMUNICATION AND INTERACTION DEVELOPMENT INDICATORS**

Communication is the creation, sending, receiving and responding to messages in a variety of situations. It involves using social skills, interactions, interpreting and use of non-verbal expressions, awareness of others and understanding the meaning and purpose of what is being shared.





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL

### SPEECH DEVELOPMENT INDICATORS

**Some common observations that trigger questions about a child's speech development are:**

- Late babble development or limited range of sounds heard.
- Missing speech sounds in words and sentences or unusual patterns of sounds used in words and sentences.
- Speech may be unclear. Developmentally, 2-year-old children's speech is often hard to understand by stranger listeners whereas 3-year olds are becoming clearer every few months. The speech sound system does not fully mature until age 6 years for most children.
- Voice?

### LANGUAGE DEVELOPMENT INDICATORS - RECEPTIVE

**Some common observations that trigger questions about a child's understanding and memory development are:**

- Distracted, lack of focus to complete tasks or over focus on peers as the child uses their behaviour to 'copy' rather than understand what is being said.
- Errors or inability to follow spoken instructions.
- Difficulty in learning new vocabulary.
- Errors in interpreting peers' or adults' non-verbal communication.
- Difficulty in joint play with peers, especially play that relies on spoken language and recall or ideas.
- Difficulty in recalling details of setting routines, names of people, details of stories.





## LANGUAGE DEVELOPMENT INDICATORS - EXPRESSIVE

**Some common observations that trigger questions about a child's expressive language development are:**

- Late to use words with a heavy reliance on symbolic sounds or non-specific language e.g. “brrrm” “that”
- Narrow verbal vocabulary and difficulty using new words.
- Errors in naming items or people, and/or difficulty using words with similar sounds or meanings e.g. “hammer” for screwdriver.
- Difficulty in sequencing their ideas (talking and/or gestures) into a logical order when commenting, explaining or re-telling.
- Immature grammar development e.g. difficulty with use of pronouns or verb tense.
- Difficulty in maintaining a flow and fluency with spoken language e.g. word repetitions, phrase repetitions, stretching of words.

## COMMUNICATION AND INTERACTION DEVELOPMENT INDICATORS

**Some common observations that trigger questions about a child's communication development are:**

- Difficulty sharing spaces, objects or people with others.
- Difficulty in taking turns – both non-verbal and verbal, fleeting shared attention or rigid to own preferences only.
- Displays of variable eye contact or eye gaze avoidance especially when in structured situations.
- Difficulty with initiating or maintaining conversations, frequently going off topic.
- Errors in understanding subtle non-verbal and social cues, including feelings, negatively influencing relationship development.
- As a result of the above difficulties, the child may show anxiety or frustration behaviours when coping with intense communication situations e.g. direct questions, unpredictable routines, talk partners.





# SEN SUPPORT TARGETED SUPPORT

## SPEECH DEVELOPMENT INDICATORS

**Some detailed observations that trigger questions about a child's progression in speech are:**

- Continues to lack babble, or oral sounds not progressing.
- Difficulty with sequencing or producing stage appropriate multi-syllabic words or sentences.
- Clarity of speech lacks progression.
- Unintelligible speech or continued unusual patterns of sounds used in words and sentences.
- Difficulty with accessing and producing sounds as part of Phonics.
- Parent/carer concern.
- Voice?

## LANGUAGE DEVELOPMENT INDICATORS - RECEPTIVE

**Some detailed observations that trigger questions about a child's progression in understanding and memory are:**

- A levelling off progression, increased gap between child and peers.
- Evidence that the child is having difficulties keeping up with verbal information, taking longer than expected to process.
- Continued difficulty in understanding spoken language.
- Continued difficulty with non-literal language e.g. humour, idioms
- Needing additional support for activities that require planning.





## LANGUAGE DEVELOPMENT INDICATORS - EXPRESSIVE

**Some detailed observations that trigger questions about a child's progression in expressive language are:**

- Continued evidence of immature vocabulary, sentence use and structures and/or self-expression.
- Hesitant talking, persistent non-fluency.
- The child has difficulty with getting peers to listen and follow their ideas, requires more time to express meaning and purpose.
- Difficulty in selecting, recalling or using words accurately for both meaning and function.
- Needing additional support for activities that require sequencing.

## COMMUNICATION AND INTERACTION DEVELOPMENT INDICATORS

**Some detailed observations that trigger questions about a child's progression in communication and interaction are:**

- Continued difficulty with gaining and maintaining shared focus, shared thinking and social learning.
- Evidence of misunderstandings, anxiety or communication behaviour changes that negatively impact the child's equal access to the curriculum and social learning, influenced by related social, emotional, and mental health.
- Increasing difficulties with social relationships, appropriate/inappropriate interactions with peers.
- Needing additional support for activities that require planning and organising with other people.





# SEN SUPPORT

## SPECIALIST SUPPORT

## SPEECH DEVELOPMENT INDICATORS

### Some indicators of significant speech needs are:

- Persistent difficulty with oral sequencing skills.
- Speech disorder.
- Significant difficulties with oral muscle co-ordination or strength.
- Significant difficulty with processing stage appropriate speech sounds at sound, word or sentence level.
- Voice?

*Evidence through the Graduated Response process indicates long term specialist input or resources are highly likely to be needed for the child to maintain and thrive within EYFS.*

## LANGUAGE DEVELOPMENT INDICATORS - RECEPTIVE

### Some indicators of significant understanding and memory needs are:

- Significant or persistent lack of understanding non-verbal signals, language, routines and sequences.
- Significant time taken to process spoken language in the moment.
- Evidence that the child lacks understanding/memory that severely restricts cross over learning into a variety of situations.
- Persistent difficulties with sustaining focus and engagement, severe impact on access to large group learning.
- Severe-profound language impairment.
- Receptive language needs include permanent sensory or physical impairments.

*Evidence through the Graduated Response process indicates long term specialist input or resources are highly likely to be needed for the child to maintain and thrive within EYFS.*





## LANGUAGE DEVELOPMENT INDICATORS - EXPRESSIVE

**Some indicators of significant expressive language needs are:**

- Significant impact on expressing interests and needs especially with peers, processing spoken language at slow speed.
- Long term expressive language needs may mean the child needs to use alternative communication tools/skills e.g. Speech Output App, Signing.
- Persistent difficulties with sustaining focus and engagement, severe impact on access to large group learning or conversation.
- Severe-profound language impairment.
- Expressive language needs include permanent sensory or physical impairments.

*Evidence through the Graduated Response process indicates long term specialist input or resources are highly likely to be needed for the child to maintain and thrive within EYFS.*

## COMMUNICATION AND INTERACTION DEVELOPMENT INDICATORS

**Some indicators of significant communication and interaction needs are:**

- Strong evidence of changes to behaviour due to lack of communication skills available, needing significant additional support through enabling environments.
- Extremely restricted interests, rigid preferences, and limited play development negatively impacts relationship building, evidence of social isolation by self or others.
- Needing significant additional support to cope with unstructured parts of the day.
- Persistent difficulties with sustaining focus and engagement, severe impact on access to group learning/social learning.





**There may be some additional complexities experienced by the child with ASD type needs e.g.**

- Severe-profound difficulties with social communication and emotions of others and self.
- Severe-profound limitations of imagination.
- Stereotyped and learnt expressive language that has little communicative purpose.
- Severe sensory processing needs.
- Extreme anxiety, significant difficulties with self-regulation skills.
- Highly atypical behaviours e.g. extreme withdraw, extreme opposition, strong compulsion and obsession.

*Evidence through the Graduated Response process indicates long term specialist input or resources are highly likely to be needed for the child to maintain and thrive within EYFS.*







# COGNITION AND LEARNING

# INTRODUCTION

In addition to the paragraphs on the graduated response Section 5 of the SEND code of practice is relevant to early years. The SEND code of practice describes a graduated response to meeting the needs of children with SEND, which is the responsibility of the early years settings, if a child continues to make little or no progress over a sustained period.

The graduated response to early years is for children up to the end of their reception year in school and it should be read alongside the Early Years SEN Descriptors, it aims to provide guidance on a clear approach to identifying and responding to children with SEND. The Early Years SEN Descriptors (EYD) should be used alongside this document and can be found on the Derbyshire Local Offer.

Most children will be able to participate in a mainstream setting and make progress through high quality provision which includes effective differentiation, known as Quality First Teaching (QFT). This means the use of appropriately planned, quality experiences and provision, built on observations of children's starting points and interests to develop their learning. Sensitive interactions are essential to support this. Making higher quality teaching normally available to everyone in a setting is likely to mean that fewer children will require additional and different support.

Children who may be achieving at levels just below typical development will generally be identified by using development matters checkpoints. Minor environmental and/or curriculum adaptations from within the school or setting's own resources can form part of Universal provision. Development Matters in the EYFS gives detailed guidance on what practitioners can do and provide to reduce barriers to inclusion.

Early learning goals summarise the knowledge, skills and understanding that young children should acquire in their learning by the end of reception.

The EYDs set out the provision that settings should make when children need additional support to achieve the development matters checkpoints. That is, at Targeted level.

If the child does not make progress despite this intervention practitioners should consider involving appropriate support services, that is moving the child to Specialist levels. The decision to involve support services should be taken with the child's parents/carers. Where, despite a setting having taken relevant and purposeful action to identify, assess and meet the needs of a child, and the child has not made good progress, the SEND code of practice suggests that the setting should consider requesting an Education, Health and Care Needs Assessment.



At each stage of support the graduated response demands an ASSESS, PLAN, DO, REVIEW model be adhered to.

It is important to remember that all children develop at varying rates, particularly in the early years. There will be many typically developing children who may not be at their chronological age level in some steps and this will not be a cause for concern

*\*“The Reception Year holds a unique and important position in education. It marks a significant milestone in a child’s life, representing both a beginning and an end. For parents, it is the end of early education and care, at home and/or across multiple settings, and the start of school. For school leaders and teachers, it is the crucial bridge between the EYFS and, for most schools, the start of the national curriculum. The term ‘Reception’ refers to leaders and staff ‘receiving’ children into their school. While many children will have already had some form of preschool provision, the Reception Year is often their first experience of full-time education. It is a time when leaders and staff establish the rules, routines and expectations of learning that will serve children well and follow them through the rest of their formal schooling.”*

Bold Beginnings (OFSTED) 2017

A child with cognition and learning difficulties will have difficulties in most of the areas below:

- Memory Skills
- Reasoning Skills
- Organisational Skills (including spoken and written language, task completion)
- Sequencing
- Problem Solving
- Concepts
- Motor Skills (fine and gross)

## TERMS OF REFERENCE

Any reference to early years settings includes:

- Maintained nursery schools
- Maintained nursery classes (as part of an Infant and nursery class or primary school)
- Reception classes in a primary school
- Private, voluntary, independent providers

This document is intended for use throughout the Early Years Foundation Stage (EYFS), including from nursery to the end of reception\*.





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL



## ASSESS DESCRIPTION OF NEED

The child's current rate of progress is inadequate with difficulties becoming apparent in relation to some of the prime areas of learning. Concerns from parents /carers are raised.

The child may demonstrate

- Difficulty with acquiring new concepts
- Limited imaginative and repetitive play
- Fleeting attention
- Difficulty with the acquisition of language/literacy/numeracy despite appropriate interventions
- Poor self- esteem and motivation
- The child's difficulties may lead to: (See Social Emotional and Mental Health)

- Poor self-esteem
- Social difficulties
- Emotional difficulties
- Frustration
- Poor concentration

All or some of the above may indicate that there may be a need for some short-term support but that with reasonable adjustments the child is able to participate in most or all of the setting activities.

Quality first teaching and the use of individual and differentiated approaches form the universal offer for all children in early year's settings. This will include the use of the assess, plan do review cycle and intervention involving the parent/carer, child and setting SENCO/keyperson.





Formalised assessment is not appropriate at this stage, observations become the core source of information and should be extended through the session and across the week. The child's strengths and challenges should be identified through developmental checkpoints and dialogue with staff and parents.

Practitioners should check there are no physical barriers i.e. sight, hearing, core stability, motor skills, sensory.

The purpose of observation and recording the developmental checkpoints is to

- Monitor the child's development
- Provide information about the child's achievements
- Evaluate and improve the provision made
- Inform future planning

The setting should ensure that a child's current interests, development and learning needs are identified. (i.e. needs that are additional to or different from what is usually provided within the setting).





## PLAN AND DO DESCRIPTORS OF PROVISION

Quality first teaching is in place that uses a variety of approaches with scaffolding and modelling to demonstrate learning.

The child should be experiencing a progressive and balanced curriculum that follows their lead and takes advantage of curiosity and in the moment learning.

Provision mapping may be used in the reception class as part of the whole school approach to ensure continuity and consistency in learning.

Whole setting/school training on identified areas of continuing professional development.

Assessment for learning to identify appropriate starting points.

The learning environment should be modified to support learning, including the use of visual aids and signing.

The child's interests are taken into account to strengthen success in achieving learning outcomes.

Elements of pupil voice and parent voice integral and explicit.

Additional adult attention for individual or small group support where relevant from practitioners within the setting.

Appropriate adjustments are in place to support daily routines, and practitioners' approaches are consistent to the child.

Practitioners' training needs are addressed.





## REVIEWING PROGRESS

The impact of the support on the child's progress should be reviewed and evaluated on a regular basis. Regular praise towards the child's strengths and achievements should be included.

At this point it should not be assumed that the child has SEND as they may be experiencing a short-term delay needing only brief intervention.

Parents should be engaged throughout the process.

Meetings should ensure that the child's views and preferences are included.

Any changes to the outcomes or to the support should be agreed and the next steps considered.

Targeted more focused support will be needed when quality first approaches have not been sufficient to meet the child's learning needs.





# SEN SUPPORT TARGETED SUPPORT



## ASSESS DESCRIPTION OF NEED

The child's current rate of progress is inadequate and there is a discrepancy between attainments and chronological age. Despite receiving structured early years experiences, the gap between their performance and that of other children the same age is widening. The child will need provision that is additional to and different from the early year's settings curriculum.

Quality first teaching including evidence from the assess plan do review cycle, monitoring and support from early years practitioners and close liaison between the setting and the family will need to continue.

In addition to the description outlined in the universal provision the following may apply

- Difficulties are becoming evident across the EYFS curriculum rather than in one area and there is evidence that the child continues to perform at the level below age related expectations in some or all of the specific area of learning

- The child has considerable difficulties with attention requiring adult support to remain "on task"
- Play lacks purpose and imagination
- Despite repeated 'assess plan do review' cycles there is limited progress, and assessments over time show that a more individualised targeted approach is needed
- Progress has been minimal despite interventions
- Practitioners may like to make use of the Derbyshire EYFS Celebratory Checkpoints documents (available on the Derbyshire Local Offer)
- In the reception class:
  - Despite QFT/reasonable adjustments, the development / progress in learning for a child or young person is at a slower rate so additional support is needed from within schools normally available resources (Element 2 funding)
  - Booster/catch-up interventions identified, costed and tracked on school provision map.







## PLAN AND DO DESCRIPTORS OF PROVISION



### **Strategies prescribed in the Early years descriptors, plus:**

The key worker should liaise with the setting SENCO and parents /carers to share concerns and an individual targeted support plan should be initiated.

In planning there should be a recognition of the child's preferred learning styles and agreement about appropriate teaching strategies. There will be increased communication with parents and carers to allow for ongoing review of learning and ensure key targets are also worked on at home.

The setting may need to:

- Develop a can-do approach
- Provide opportunities for practice and generalisation of new skills learnt
- Carefully structure new tasks so the child knows what is expected of them
- Recognise and reward good attention

- Develop social interaction so the child can work cooperatively with other children, take turns and develop imaginative play
- Provide individual and small group support where the child can learn new skills and concepts and have the opportunity to practice and consolidate these
- Ensure appropriate differentiation of problem solving and other investigative play activities
- Develop the child's concentration and attention and help them to stay on task
- Provide opportunities for the child to copy good models of play and behaviour
- Reasonable adjustments within the classroom to allow for access to the curriculum (e.g., adaptations where appropriate, such as specialist scissors, wobble cushions, pencil grips)
- Increased use of technology where appropriate





## REVIEWING PROGRESS

Targeted provision should be regularly monitored and reviewed by the keyworker and the SENCO to measure progress and attainment against outcomes.

Review and planning meetings should be held regularly and should be attended by parents/carers and ideally should be chaired by the SENCO.

There should be increased involvement of parents/carers and during the meeting the views of parents /carers and children where possible should be sought, respected and documented.

Clear outcomes should be set about what the support is intended to achieve.

Written records of the meeting should be circulated to parents and a copy put in the child's My SEND Learning Programme.

At the end of the review meeting consideration will need to be made as to whether the child should move up to the next stage of the process, aimed at supporting children with more complex needs.



Consideration will also need to be given as to whether advice is needed from more specialist services such as the EYSENTS/ EPS/ SSSEN/health professionals and referrals should be made as appropriate by the SENCO.

Where there are ongoing concerns about the child's rate of progress and their learning needs are assessed as significant and long term then the setting can apply for the Early Years SEN Inclusion Fund. In the reception class, this comes through the GRIP process (Graduated Response for Individual Pupils).

Parents should be signposted to the Derbyshire Local Offer if they require more specific information.





# SEN SUPPORT SPECIALIST SUPPORT



## ASSESS DESCRIPTION OF NEED

**In addition to the description of need outlined in the previous universal and targeted sections the following will apply**

- The child may have an identified syndrome or physical/ medical need which has been diagnosed by a pediatrician or other health specialists
- The child will have complex and persistent difficulties and is not making expected progress despite high levels of focused interventions.
- The gap in their stage of development and their peers increases significantly

The child's on-going learning difficulties are a significant barrier to their development across several areas of the EYFS curriculum

It is important that the focus is on the child's abilities not disabilities. Assessment and planning should be as within the universal and targeted sections plus the following:

Specialist interventions will be needed which draw on more in-depth learning assessments such as those implemented by Early Years SEN Teaching Service / Educational Psychologist (EP).

Assessment schedules for children with more significant cognitive delay include:

- Derbyshire EYSEN small steps profiles
- Derbyshire EYSEN social and communication profile
- Early years developmental journals

Assess plan do review cycles will need to continue to assess need, identify outcomes, implement support and to monitor and evaluate progress.

Professional advice from outside agencies must be followed over time and appropriate support put into place by the early years setting/school.





## PLAN AND DO DESCRIPTORS OF PROVISION

Everything prescribed in the universal (EYD) and targeted sections plus:

An adapted curriculum needs to be developed that is more individualised to the needs of the child.

Environments may need to be adapted to make them accessible with designated learning areas provided where necessary.

Training opportunities should be available for all staff members. Training on aspects of SEND are available to settings through Derbyshire S4S and the EventBrite platform. Derbyshire's support services also offer menu of bespoke training.

A highly structured and individualised learning programme with advice sought from specialist services (e.g. Educational Psychology (EPS), Support Service for SEN (SSSEN), Speech and Language Therapy (SALT). Parental permission must be given for the involvement of specialists.

Increased transactional supports will be needed for modelling and to enable the child to access learning and the curriculum.

Additional support in the form of highly skilled differentiated strategies will be needed across cognition and learning.





## REVIEWING PROGRESS

The plan do review cycle may need to be revisited in more detail.

Continued monitoring of pupil progress towards an individualised SEN support plan (My SEND Learning Programme).

Specialist provision should be reviewed by the keyworker, the SENCO and external advice givers to measure progress and attainment against outcomes.

There needs to be clear evidence that advice from external agencies has been fully implemented over a significant period of time.

Parents and carers must be invited to a review.

Where early years practitioners, advice givers and parents feel the child has made adequate progress then consideration should be given to returning to the earlier stages of the graduated response.

If despite graduated cycles of assess plan do review there continues to be ongoing concerns about the child's rate of progress and their needs are seen as significant and long term then parents/settings may need to consider a referral for an EHCP needs assessment.





# **SOCIAL, EMOTIONAL & MENTAL HEALTH**

# INTRODUCTION

The EYFS requires that “Providers are responsible for managing children’s behaviour in an appropriate way” (Statutory Framework for the Early Years Foundation Stage 2021, 3.53). For most children in the EYFS, setting-wide provision reflecting the positive behaviour policy and procedures will be sufficient to bring about successful progress in this area. Some behaviour that can be difficult to manage is part of typical child development and not a cause for concern (see guidelines below).

However, some children will experience more persistent or significant difficulties with relationships, play, sharing, managing emotions etc. Some of these children will respond well to a differentiated approach and tailored support so that such support is only needed for a short period of time. Other children may continue to have difficulties and need more in-depth attempts to understand their needs and longer-term support of various kinds.

Underpinning this section is a belief that all behaviour, no matter how challenging, has a reasonable purpose underlying it. Hence, difficulties with behaviour in this sense reflects an unmet need. Identification of difficulties in this area must take account of these unmet needs.

A critical element in moving forwards is developing your best understanding of what underlies the behaviour, so that you can try to enable the unmet need to be met more appropriately. If this is done successfully, difficult behaviour is likely to reduce. If, on the other hand, the underlying purpose is not considered, and the focus is simply on getting rid of the unwanted behaviour, it is most likely that the behaviour will persist, or that you are successful in extinguishing one behaviour but another arises to replace it, as the underlying need remains unmet. Understanding of a child’s difficulties in this area will be informed by knowledge of their development across all areas, and so the other areas of this document will be helpful in bringing that knowledge to bear.

Another key belief underpinning this section is that behaviour arises from a complex combination of not just their development in all areas, but also their experiences in the past and present, and interaction with the environment around them. In other words, their behaviour is not a product of ‘within-child’ factors alone. Again, understanding of the child’s background and experiences, and of features in the environment that help or hinder their behaviour, is key to being able to support them appropriately.



Children’s usual patterns of behaviour can change in response to a variety of changes in their circumstances, e.g. the arrival of a new baby or if a member of staff leaves, and this is quite common. However, practitioners should be aware that sudden changes in a child’s behaviour could be indicative of issues requiring a response under the guidelines for ‘Safeguarding and Welfare Requirements’ (Statutory Framework for the EYFS 2021, Section 3).

### **GUIDANCE ON EXPECTED DEVELOPMENT IN SEMH AREAS**

#### **By 1 year**

- Developed a close attachment to primary carers and shows preferences within other relationships
- Demonstrates a level of upset around separation from carers
- Responds differently to unfamiliar people, voices and places
- Demonstrates a range of emotions
- Reacts emotionally to others’ emotions
- Uses voice, gesture, eye contact and facial expression to make contact with people and keep their attention

Typical behaviours you might find challenging

- Clingy, cries when primary carer is not in sight
- Fearful of unfamiliar people

- Cries for seemingly no reason (unable to communicate needs, response to someone else’s emotions, wary of unfamiliar person)

#### **By 2 years**

- Uses a familiar adult as a secure base from which to explore independently in new environments, ‘checking in’ for reassurance and guidance
- Seeks to gain attention in a variety of ways, drawing others into social interaction
- Reacts to an audience, for example, repeats any activity or action which is received positively by a smile, or that is laughed at, applauded or cheered
- Is aware of other’s feelings, for example, looks concerned if hears crying or looks excited if hears a happy voice
- Demonstrates care towards other children

Typical behaviours you might find challenging

- ‘Attention seeking’ (requiring lots of attention to feel safe, secure, valued and reassured)
- Snatching, (unable to share and unaware of others emotional needs)
- ‘Manipulative’ (developing understanding of how their behaviour can affect others)





- ‘Meltdowns’ (frustrated at their limitations around communication, self-regulation and understanding of their environment)
- ‘Refuses to allow an adult to help’ (developing sense of autonomy and independence skills)
- Generally very busy and impulsive

### **By 3 years**

- Interested in others’ play
- Seeks out others to share experiences
- Shows affection and concern for people who are special to them
- Becomes nervous during new activities but will ‘have a go’ if a familiar adult is present
- Separates from main carer with support and encouragement from a familiar adult
- Shows sense of own autonomy
- Shows understanding and cooperates with some boundaries and routines
- Shows awareness of own feelings and knows that some actions and words
- Can hurt others, not always maliciously

- Plays confidently and usually cooperatively with other children
- Typical behaviours you might find challenging

- ‘Domineering/taking over’ (mismatch between self-awareness, confidence and awareness of the needs and interests of others)
- ‘Cannot sit still and concentrate on adult led activities’ (continued development of physical skills, kinaesthetic learning style (active learning) and inappropriate expectations around focus/attention skill development)
- ‘Refuses to follow instructions/rules’ (not yet able to process information at the level it is given and not yet able to switch focus from one activity to another)
- Frustration over their lack of skills and ability to achieve their goals independently
- Strong sense of ownership over toys etc (Only just beginning to understand that turn taking includes even their favourite resources)
- Forgetting the rules, reminders needed as in the moment their personal needs/preferences still take precedence over their community responsibility
- May have fears that seem irrational to adults



### By 4 years

- Initiates play, offering cues to peers to join them
- Is more outgoing towards unfamiliar people and is more confident in new social situations
- Begins to accept the needs of others and cooperates in play with children they like
- Confident to talk to other children when playing, and will communicate freely about own home and community
- Has strong sense of own space and possessions; likes to arrange own toys
- Can usually tolerate delay when needs are not immediately met

#### Typical behaviours you might find challenging

- ‘Tells on others excessively’ (building sense of personal space/possessions, moral justice and pleasure in doing the right thing)
- Struggles with waiting (not yet developed impulse control or ability to delay gratification)
- Frequent disputes with peers
- Pushes the limits of boundaries
- Lacks confidence and rarely joins in with social activities

### By 5 years

- Engages others in pleasurable interaction
- Shows confidence in joining others for support and guidance
- Confident to speak to others about own needs, wants, interests and opinions
- Understands that own actions affect other people, for example, becomes upset or tries to comfort another child when they realise they have upset them
- Shows care and concern for others, living things and the environment
- Takes steps to resolve conflicts with other children, e.g. finding a compromise
- Takes part in activities they don’t necessarily like, to please friends
- Knows they cannot always have what they want when they want it

#### Typical behaviours you might find challenging

- Difficulty making friends due to not having the necessary skills
- May appear bossy because of a belief that some rules are fixed – may think they can take on the adult role
- May appear oppositional, caused by wanting to be independent beyond their abilities/responsibilities
- Becoming upset if they do not succeed (developed sense of pride but lack of resilience)
- May appear bossy with peers and adults (showing confidence and ability to stand up for self)



### THE SEND CODE OF PRACTICE 2015 SAYS;

*“A delay in learning and development in the early years may or may not indicate that a child has SEN, that is, that they have a learning difficulty or disability that calls for SEN provision. Equally, difficult or withdrawn behaviour does not necessarily mean that a child has SEN. However, where there are concerns, there should be an assessment to determine whether there are any causal factors such as an underlying learning or communication difficulty. If it is thought housing, family or other domestic circumstances may be contributing to the presenting behaviour, the multi-agency approach, supported by the use of approaches such as the Early help Assessment should be adopted. (COP 2015, 5.29)*

*“Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactivity disorder or attachment disorder”. (COP 2015, 6.32)*

*“Schools (providers) and colleges should have clear processes to support children and young people, including how they will manage the effect of any disruptive behaviour, so it does not adversely affect other children. The Department for Education publishes guidance on managing children’s mental health and behaviour difficulties in foundation stage provision”. (COP 2015, 6.33)*

### TERMS OF REFERENCE

Any reference to early years settings includes:

- Maintained nursery schools
- Maintained nursery classes (as part of an Infant and nursery class or primary school)
- Reception classes in a primary school
- Private, voluntary, independent providers

This document is intended for use throughout the Early Years Foundation Stage (EYFS), including from nursery to the end of reception\*.





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL



### ASSESS DESCRIPTION OF NEED

**Some difficulties with behaviour and/or indications of social / emotional difficulty may be seen in all children, appropriate to their developmental stage (see above).**

Settings will use guidance in Development Matters, the keyworker system, and any systems of assessment / monitoring to give them a good understanding of a child's strengths, needs and progress in different areas.

Communication with parents/carers will be open and easy, building trust and confidence so that parents/carers will be able to share important information about the child's life at home, significant events etc.

Settings should consider the LA approach to Sensory Processing Needs materials ensuring that all staff are aware of sensory needs.

The Derbyshire Local Area approach to sensory processing needs materials can be found on SchoolsNet and the Derbyshire Local Offer.





The materials include all the phase 1 and phase 2 documents – Position Statement; the Introduction to SPN leaflet, SPN continuing professional development offer; the Derbyshire Local Area Sensory Processing Needs toolkit and the role of sensory champion’s document.

Settings should consider the NASEN ‘7days many ways’ program around developing children’s resilience. This can be downloaded from Nasen’s website.

## DEVELOPMENT MATTERS

“When children are at earlier stages of development than expected, it is important to notice what they enjoy doing and also find out where their difficulties may lie. They need extra help so that they become secure in the earlier stages of development. It is not helpful to wait for them to become ‘ready’”

### 1. The best for every child

High-quality early education and care is inclusive. Children’s special educational needs and disabilities (SEND) are identified quickly. All children promptly receive any extra help they need, so they can progress well in their learning.

*Taken from ‘Seven key features of effective practice’ (Development Matters, 2021: pp 8-11)*

### 5. Assessment: checking what children have learnt

Effective assessment requires practitioners to understand child development. Practitioners also need to be clear about what they want children to know and be able to do.

Accurate assessment can highlight whether a child has a special educational need and needs extra help.

When assessing, consider the Characteristics of Effective Learning and use the PSED section of the guidance if you require support.

#### • Well-being and involvement scales

The Leuven Scale is a form of assessment developed by Ferre Leavers and his team at Leuven University in Belgium. It is a five-point scale that allows childcare practitioners to measure children’s ‘emotional well-being’ and ‘involvement’ – two vital components of learning, development and progress in all children, including those with SEND.

#### • ITERS - Infant/Toddler Environment Rating Scale

The ITERS is a setting-based assessment tool designed to measure the quality of provision for infants and toddlers (birth to age 3) by collecting data through detailed observations and a staff interview. The assessment is a 39-item rating scale organised into seven environmental subscales.



- **ECERS - Early Childhood Environment Rating Scale**

This audit tool focuses on a full range of needs of pre-school children (3-5 years of age). It is a comprehensive assessment tool that measures both environmental provisions and practitioner led interactions that affect the broad developmental needs of young children, including cognitive, social and emotional and health and safety.

- **FCCERS- Family and Childcare Environmental Rating Scale**

This audit tool scale is aimed at childminders who support children in the home before, after school and all day.

- **SSTEW- Sustained shared thinking and emotional well-being**

This is a self-evaluation audit tool that builds on ECERS-R and ECERS-E/ITERS-R focusing on the pedagogy within the setting, the adult's role in supporting learning and development and considers high quality interactions with and between children.





## PLAN AND DO DESCRIPTORS OF PROVISION



**‘Providers must have arrangements in place to support children with SEN or disabilities.’ (EYFS Statutory Framework, 2021: p37).**

Quality First Teaching is a style of teaching that emphasises high quality, inclusive teaching and learning for all children in a class. QFT includes differentiated learning, strategies to support SEN pupils’ learning, on-going formative assessment and many others. The core principles are consistently: personalising learning to children, encouraging greater inclusion of children with SEN needs, and working to narrow the attainment gap.

*Taken from ‘Seven key features of effective practice’ (Development Matters, 2021: pp 8-11)*

### **6. Self-regulation and executive function**

- Executive function includes the child’s ability to
  - hold information in mind
  - focus their attention
  - regulate their behaviour
  - plan what to do next

- These abilities contribute to the child’s growing ability to self-regulate
  - focus their thinking
  - monitor what they are doing and adapt
  - regulate strong feelings
  - be patient for what they want
  - bounce back when things get difficult.

Positive whole-setting ethos, Positive Behaviour policy applied consistently, including clear expectations for behaviour, praise and rewards.

Open communication with parents/carers.

Ongoing modelling, demonstration and discussion of how to play together, sharing, turn-taking, identifying / managing feelings, seeking help etc.

Assess the continuing professional development needs of staff around sensory processing needs and access training from appropriate council specialist services provider.

Carry out the environmental audit provided within the ‘Sensory smart environment’ section of the Derbyshire Local Area Sensory processing needs toolkit. Make any environmental adjustments highlighted as necessary from the audit.





## REVIEWING PROGRESS

### Development Matters

- Using the 'checkpoints' in the guidance to support your decision-making about children's progress.
- Use your knowledge of the child and child development to support whether progress is being made and what next?
- Review impact of NASEN '7 days many ways' activities upon whole group resilience skills
- Review barriers to making adjustments recommended and impact of environmental adjustments made to whole group







# SEN SUPPORT TARGETED SUPPORT



## ASSESS DESCRIPTION OF NEED

Difficulties are seen in some children that are not within normal expectations for their developmental stage, and/or are considerably hindering their / others' opportunities for development in learning and play.

A range of information can help us to understand the behaviour better

- Good information about the child's skills in all areas, as we need to consider behaviour in the context of developmental levels rather than chronological age. Development Matters guidance can be used to support this. The child may have identified diagnoses with implications for their development or might have significant difficulties with learning or speech and language skills, for example, that are creating the circumstances in which the social/emotional need arises. It will be helpful to refer to other areas of the Graduated Response document for guidance on assessment in those areas.
- If you have not already done so, consider completing the Child Monitoring Tool – Communication and Language Assessment, including social development, listening and attention.
- Consider completing the Physical Development monitoring tool.
- Assess sensory processing needs using Sensory Processing Needs toolkit.
- Consider what the child's current skills are around the 7 C's of resilience (coping, connection, character, confidence, control, competence and contribution) and any needs there might be for support to develop new skills. Information available on the Nasen website
- Observations / records of the behaviour to identify; how often the behaviour occurs, for how long, how severe, what happens before and after the behaviour (often captured in an ABC chart – Antecedents, Behaviour, Consequences).





- Information about what happens before and after the behaviour will help to identify what makes it more (and less) likely to happen, and what outcomes might make it more likely to happen again (e.g. if the child gains something from the behaviour, such as a toy to themselves, or more adult interaction).
- Involvement of the child as far as possible in discussion of the issues/what helps etc. The extent to which this is possible will vary according to their developmental stage/skill levels.
- Collaboration with parents/carers: sharing hopes, wishes and information relating to the child's strengths and needs.
- Information about the child's background: past or current trauma, bereavements, lack of basic essentials such as housing, food etc., can all result in unmet needs (including attachment difficulties) that may be reflected in a child's behaviour. A child's behaviour results from a complex mix of their experiences and interaction with the current environment. You might not be able to influence past events, but knowledge can help develop your understanding of current behaviour, and you can also make changes in their current environment to better meet their needs. Adverse childhood experiences (ACEs) resources can support information-gathering and can be found online.
- Discuss with parents/carers the history of the behaviour, where/when it occurs most / least, significant events in the child's life, current circumstances etc. Regular and honest communication between the setting and home is crucial, particularly when changes in behaviour occur suddenly: all behaviour occurs for a reason.
- Consider what is the behaviour communicating? What is the child's 'I message'? If the behaviour could talk, what might it be saying, for example 'I'm frightened', 'I'm angry', 'I want my daddy', 'I don't understand', 'I'm hungry', 'I want to play with you'.
- Consider what the child appears to gain from the behaviour, what is the unmet need, e.g.
  - More or less interaction with adults or children
  - Avoidance of something
  - Control, making choices
  - Expressing emotion (e.g. anger, anxiety, excitement)
  - Sensory stimulation (reducing/increasing)
- Consider drawing up a more formal behaviour plan/Multi-Element Plan/Emotional Wellbeing Support Plan, enlisting support from parents/carers and other professionals.





## PLAN AND DO DESCRIPTORS OF PROVISION



### **Use other areas of this document to gather information on the child's development in all areas.**

Use information gathered regarding the needs of the child to make appropriate environmental changes

- Physical, e.g. lighting, heating, layout of furniture, noise level, safe/quiet spaces.
- Social, e.g. language used, visual supports, groupings of children.
- Curriculum, e.g. differentiation of activities (level, presentation, maximising engagement), scaffolding/support provided to access activities.

Use information gathered regarding the needs of the child to consider target areas for their skill development, to include

- Capitalising on areas of strength/enjoyment, e.g. using a physical, outdoor context for work on turn-taking / sharing.
- Addressing areas of difficulty that might be contributing to the behaviour difficulty, e.g. 1:1 or small group work on development of speech skills, sharing / joint play, mark-making skills, or any other area identified.
- Working on emotional literacy skills, e.g. naming different emotions, identifying own/others' emotions, coping with non-preferred activities/situations, etc.

- Consistent use of rewards and positive recognition of any improvement in behaviour. Rewards should be
  - Relevant/interesting/motivating to the child.
  - Given as soon as possible after the behaviour being rewarded, with specific praise of the behaviour so the link between the positive behaviour and the reward is clear.
  - Varied to keep interest, mix up different types of rewards. Rewards can be:
    - Tangible (i.e. of value in themselves – toys, crayons, etc)
    - Social (where the rewarding element is the social aspect, e.g. time with special adult reading a book, or simply someone praising them)
    - An activity, possibly involving others
    - Token (ticks on a chart, stamps, stickers etc)
- Enhanced contact / communication with parents/carers, focusing on successes and progress where possible.
- Following the use of the LA approach to SPN toolkit resources develop a sensory plan with professionals and parents considering the impact of SPN on the child's self-regulation and SEMH
- Using the NASEN 7 days many ways model, develop individualised resilience diary of activities to be shared with home.





## REVIEWING PROGRESS

Review progress/development of new skills / provision made with whole team, parents/carers and professionals involved.

The SEND code of practice (2015) states that where a child does not make sufficient progress through the usual approaches to teaching and learning, staff should decide on 'additional to' or 'different from' interventions.

Continued monitoring of pupil progress towards an individualised SEN support plan. These should be regularly assessed, tracked, monitored and evaluated.

- Regular reviews, at least on a termly basis and involving parents and the child or young person.
- The review should focus on
  - Assessment of progress
  - Current barriers to learning
  - Effectiveness of strategies
  - Impact of any previous interventions
  - New information or factors
  - Setting of new targets and strategies





# SEN SUPPORT SPECIALIST SUPPORT



## ASSESS DESCRIPTION OF NEED

**Difficulties at this stage are seen to persist and possibly worsen despite additional / different provision made under Targeted Support.**

Revisit/extend information-gathering described under 'Targeted support', review any plans developed at that stage.

Seek new/further input from support services in education/ health/social care as appropriate to the child's needs, e.g. Early Years Special Educational Needs Service, Support Service for children with Special Educational Needs, Educational Psychology Service, Behaviour Support Service, health professionals, such as physiotherapists, occupational therapists, speech and language therapists, CAMHS and complex behaviour service; social workers, family support workers. Liaise with those professionals as necessary to develop plans/ incorporate their advice into broader plans.





## PLAN AND DO DESCRIPTORS OF PROVISION

Make further adaptations/ differentiation in accordance with revisiting the information-gathering, pertinent “I Messages” etc. from Assessment stage.

Develop a specific positive Behaviour Plan / Multi-element Plan / Emotional Wellbeing Support Plan if not already done at Targeted Support.

Follow guidance from any specialist services involved, seek training to be able to do so, as necessary.



## REVIEWING PROGRESS

Review progress/ development of new skills/ provision made with whole team, parents/carers and professionals involved.

Child Monitoring Tool and Physical Development monitoring tool – should be in setting, if not contact the EYSEN helpline or Early Years Improvement Service.





# SENSORY AND/OR PHYSICAL NEEDS



# INTRODUCTION

In this section, you will find information about the following;

## 1. DEAF & HEARING IMPAIRED

## 2. VISION IMPAIRMENT

## 3. MULTI-SENSORY IMPAIRMENT

## 4. PHYSICAL/MEDICAL NEEDS

### TERMS OF REFERENCE

Any reference to early years settings includes: -

- maintained nursery schools
- maintained nursery classes (as part of an infant and nursery class or primary school)
- private, voluntary, independent providers

This document is intended for use throughout the Early Years Foundation Stage, that is from FS1 to the end of reception

### THE SEND CODE OF PRACTICE 2015 SAYS;

*6:34 Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support.*





# 1. DEAF & HEARING IMPAIRMENT

**Deaf and HI children have the same potential to achieve and attain as any other child given the right levels of support and access to the curriculum. It is important to know the degree and nature of the child's hearing loss. It could be:**

- Mild, moderate, severe or profound
- Fluctuating or permanent
- Affecting one or both ears

We recognise that having both a hearing impairment and other additional needs may give rise to further implications for learning and development and the Deaf and Hearing Impaired (HI) team are happy to liaise closely with other professionals working with these children.

If you have a child within your setting who meets the criteria set out below and does not yet have a Teacher of the Deaf involved, please make a referral to the Derbyshire Sensory and Physical Support Service (SPSS). Please note that parental permission is required for this.

Criteria for involvement: the child is a resident of Derbyshire and/or attends a Derbyshire setting and has one or more of the following:

- a hearing loss in both ears of 30dB or more in the better ear
- been prescribed with a hearing aid
- a hearing loss in one ear of 30dB or more, averaged over the mid frequencies
- a high-frequency hearing loss of any kind
- a diagnosis of auditory neuropathy

The referral form can be found both on the DCC website and the Derbyshire Local Offer.

Please refer to the Early Years SEN Descriptors for Deaf and HI. The descriptors outline local authority expectations about types and levels of support which early years pupils in Derbyshire should receive through school or early years setting SEN support as described in the SEN code of practice.





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL



## ASSESS DESCRIPTION OF NEED

**Many children may have some degree of hearing loss at some point in their early years. This may affect one or both ears and may be temporary or permanent. The hearing levels may fluctuate.**

The child may:

- Have reduced exposure to overhearing language (incidental language)
- Have difficulty focusing, listening or concentrating and following conversations
- Have difficulty locating the source of sound or hearing speech on one side
- Need things to be repeated
- Be reluctant to join in group discussions and activities

- Have speech, language and literacy difficulties
- Have difficulties in understanding speech when there is background noise, or more than one person is speaking
- Have difficulty in social situations - playing with other children or joining in group situations
- Have some difficulty processing or remembering new information, vocabulary or language
- Experience fatigue owing to the increased effort required for listening - they may need to focus on the speaker's face and benefit from lip reading

The child will need some short-term support or intervention, but it should not necessarily be assumed that they have special educational needs.





The type, degree and diagnosis of a hearing loss should be confirmed through appropriate medical services – audiology and/ or Ear, Nose and Throat (ENT). As the level of hearing loss may fluctuate over time (particularly in young children), it is important to maintain close liaison with the family and health services as appropriate.

**All children require:**

- Systems in place for staff to be able to seek the views of the parents/ carers about their child’s hearing needs
- Appropriate policies for supporting children with hearing needs
- Settings to consider the needs of children with a hearing loss in their accessibility planning
- Internal assessment and review of all environments to ensure they are acoustically friendly
- Whole-setting awareness of the implications of a hearing loss for a child and for appropriate strategies to ensure the inclusion of children with a hearing loss
- Risk assessments in place for educational activities on or off site to include the needs of individual children within the group. There should be consistently followed processes in place for handing over individual child needs at times of transition between settings or staff in different environments





## PLAN AND DO DESCRIPTORS OF PROVISION

### All children will require access to:

- Good quality listening environments (e.g. strategies to minimise background noise, seating arranged for best viewing and hearing of key adults and spoken information)
- Differentiated curriculum considering individual needs
- Personalised learning goals
- Frequent monitoring of a child's understanding of concepts or tasks
- Regular repetition of contributions from other children and staff
- Use of clear and precise instruction, with repetition and review
- Use of appropriate cues to deliver instructions or information



## REVIEWING PROGRESS

Regular reviews of each child's progress in consultation with the child and parent/carer. This will follow the setting's assessment cycle reviewing child attainment and progress.





# SEN SUPPORT TARGETED SUPPORT



## ASSESS DESCRIPTION OF NEED

**Some children's hearing needs cannot be met by universal approaches over sustained period of time.**

The child may:

- Have difficulties listening when they cannot see the speaker's face and when further away (more than 1.5 m). They may or may not use hearing aids
- Have reduced exposure to overhearing language (incidental language) and therefore may have a reduced repertoire of vocabulary and more limited functional language and linguistic social skills
- Be unable to access the full range of speech sounds even with hearing aids thereby impacting on language and literacy development
- Have difficulties accessing the curriculum
- Have difficulties with learning new vocabulary or understanding new concepts
- Have reduced auditory memory skills
- Experience frustrations or anxieties associated with difficulties communicating
- Experience anxiety or distress when the routine or task changes as they have not heard the speaker
- Rely on peers or vision cues to cue in to expected responses or in following routines
- Experience difficulties in social situations, in developing and maintaining friendships or understanding some social situations





- Experience frustrations and anxieties related to understanding or accepting the hearing loss and its implications
- Experience listening/ concentration fatigue they have to pay much more attention than children with typical hearing levels. This means they use more of their cognitive resources in listening, lip-reading or following signed conversations, and have less energy for other things
- If a child requires provision additional to or different from that which is normally available in the setting, then staff should consider whether the child should be identified as having special educational needs and recorded at SEN support.
- If the child meets the referral criteria as set out above and does not yet have a Teacher of the Deaf involved, please make a referral to the Sensory and Physical Support Service. Please note that parental permission is required for this. Appropriately prescribed assistive hearing devices should be regularly reviewed by the relevant medical teams.

**Some children may require the following additional measures:**

- Assessment and observation by a Teacher of the Deaf and/ or Speech and Language Therapist to provide guidance on management strategies, hearing thresholds, communication skills and approaches and support and advice around specialist equipment and the listening environment
- Setting staff to receive bespoke training by the Teacher of the Deaf to enable the individual needs (learning, communication, equipment, social and emotional) to be met
- Advice and support from external agencies
- Additional support for language and communication including signed support





## PLAN AND DO DESCRIPTORS OF PROVISION

In addition to universal provision, some children may require:

- Input from a Teacher of the Deaf for support, advice, training and assessment as appropriate
- Specific targeted interventions for the development of listening, language or communication skills
- Differentiation of activities and materials which take into consideration the impact of the hearing loss
- Access to additional small group or 1:1 teaching
- Additional time for processing information or responding to a question
- Cueing into who is talking or if there is a change in topic
- Provision of additional resources
- Pre and post-teaching of concepts/vocabulary
- Opportunities to develop auditory memory skills
- Signed/visual support from key staff who have undergone appropriate training
- Regular checking of hearing technology by setting/school staff to ensure it is working optimally
- Access to a quiet area for more direct language input and/or rest breaks





## REVIEWING PROGRESS

**Reviews of progress should take place regularly (e.g. 3 x year).**

Reviews are key to the assessment process and should be fully recorded.

Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met then strategies/resources should be changed, or targets broken into small steps. If targets are met, arrangements and targets should be adjusted.

Parents/carers/child's views should always be sought as part of the review process.

Records of steps taken to meet the needs of individual children and the impact these steps have had should be kept and be available as needed.

Where appropriate, reviews should involve input from external professionals.

In analysing progress that has been made the child may:

- No longer need targeted support and their needs may be met from universal approaches
- Continue to need targeted support
- Need more specialist support







# SEN SUPPORT

## SPECIALIST SUPPORT



## ASSESS DESCRIPTION OF NEED

**A few children's hearing needs cannot be met by universal or targeted interventions and support approaches alone. In these cases, their hearing difficulties are likely to be long term and may impact significantly on:**

- Communication – they may use British Sign Language (BSL) as a first language
- Access to the curriculum
- Language and communication development- receptive and expressive communication is delayed
- Acquisition and development of early literacy skills
- Ability to communicate effectively in the setting, or at social times
- Ability to follow instructions

- Educational progress - not achieving expected levels particularly in the language-based areas
- Ability to form friendships or understand social expectations

These children may require a higher level of adult support/ intervention. They may rely on sign language or other forms of visual communication.

They may require a personalised approach which draws on detailed interventions and support involving ongoing monitoring by appropriate specialist professionals.

If a child, despite graduated cycles of assess, plan, do and review, does not make progress consideration may need to be given to the appropriateness of requesting an EHC needs assessment.





Most children with a hearing loss requiring an EHC needs assessment are identified through close liaison with setting, family, medical services and education support services.

**In addition to the measures implemented in universal and targeted, a few children may require the following:**

- Additional support for language and communication skills
- Additional support to access the curriculum
- Additional support to develop social and emotional skills
- Additional specialist assessments to contribute to the child's support plan





## PLAN AND DO DESCRIPTORS OF PROVISION

**In addition to the intervention and support approaches put in place at the universal and targeted level, a few children may require:**

- Input from a Teacher of the Deaf to offer advice and training to staff, contribution to any multi-agency involvement; liaison with parents/carers; specialised assessments etc.
- Highly structured and individualised programmes and interventions to support learning
- High levels of 1:1 support for developing:
  - Listening and attention
  - Language
  - Communication skills
- Support and intervention to develop social skills and deaf awareness. This may include opportunities to meet peers with a hearing loss
- BSL/communication support from appropriately qualified staff
- Regular checking of hearing technology by setting/school staff to ensure it is working optimally
- Access to a quiet area for specialist teaching and/or rest breaks





## REVIEWING PROGRESS

**Reviews of progress should take place regularly (e.g. 3 x year).**

Reviews are key to the assessment process and should be fully recorded.

Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met then strategies/resources should be changed, or targets broken into small steps. If targets are met, arrangements and targets should be adjusted.

Parents/carers/child's views should always be sought as part of the review process.

Records of steps taken to meet the needs of individual children and the impact these steps have had should be kept and be available as needed.

Where appropriate, reviews should involve input from external professionals.

In analysing progress that has been made the child may:

- No longer need support at specialist level and their needs may be met from targeted or universal approaches
- Continue to need specialist provision
- Need more intensive personalised support



## 2. VISION IMPAIRMENT

**If you have a child within your setting who meets the criteria set out below and does not yet have a teacher of Vision Impairment involved, please make a referral to the Sensory and Physical Support Service (SPSS).**

Criteria for involvement:

The child is a resident of Derbyshire and/or attends a Derbyshire setting and has one or more of the following:

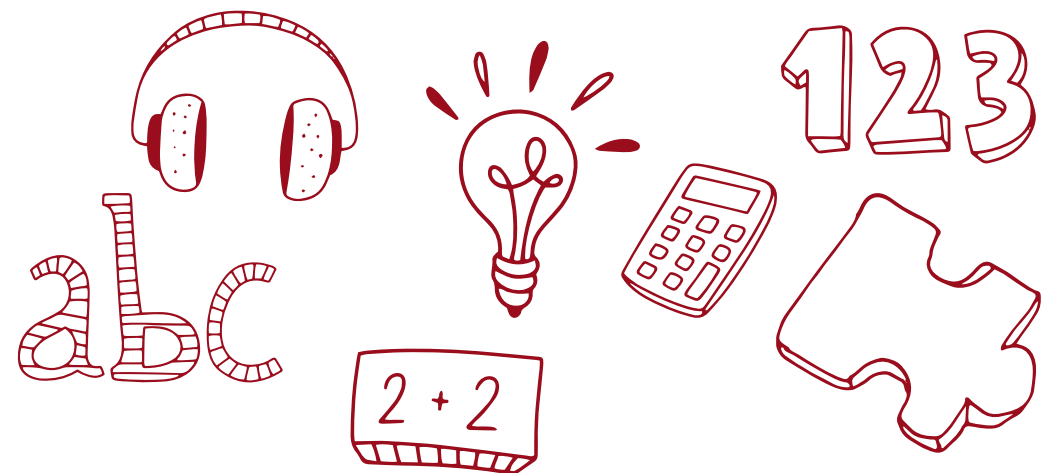
- has a vision impairment that is not corrected by glasses
- a diagnosis of cerebral vision impairment
- The referral form can be found on the DCC website or the Derbyshire Local Offer. Please note that parental permission is required for this referral.

Please refer to the Early Years SEN Descriptors for VI. The descriptors outline local authority expectations about types and levels of support which early years pupils in Derbyshire should receive through school or early years setting SEN support as described in the SEN code of practice.

We recognise that having a vision impairment and additional needs has further implications for learning and development and the VI team are happy to liaise closely with other professionals working with these children.

Some children with a Vision Impairment are identified through close liaison with medical services prior to starting in an Early Years setting.

The SEND code of practice describes a graduated response to meeting the needs of children with SEND, which in early years settings, should be led and coordinated by the setting SENCO. Where despite purposeful action by the setting, a child continues to make little or no progress over a sustained period practitioners should consider involving appropriate specialists. The decision to involve specialists should be taken with the child’s parents. Where, despite a setting having taken relevant and purposeful action to identify, assess and meet the needs of a child, and the child has not made good progress, the SEND code of practice suggests that the setting should consider requesting an Education, Health and Care Needs Assessment.



### THE SEND CODE OF PRACTICE 2015 SAYS;

*6:34 Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support.*

### TERMS OF REFERENCE

Any reference to early years settings includes

- maintained nursery schools
- maintained nursery classes (as part of an Infant and nursery class or primary school)
- private, voluntary, independent providers

This document is intended for use throughout the Early Years Foundation Stage, that is from FS1 to the end of reception





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL



### ASSESS DESCRIPTION OF NEED

**Most children's vision needs will be met by universal approaches.**

If a child requires provision additional to or different from that which is normally available in the settings, then staff should consider whether the child should be identified as having special educational needs and recorded as at SEN Support.

If a child's vision is fully corrected by wearing glasses, that child does not have a Vision Impairment.

Staff in settings should follow advice on the wearing of glasses.

Glasses should be kept clean.





## PLAN AND DO DESCRIPTORS OF PROVISION

### All children will require access to the following intervention and support

- Access to a suitable vision and learning environment
- Early Years Curriculum intervention that takes account of individual needs
- Personalised learning goals
- Strategies that promote independence but also support learning

Staff in settings should follow medical advice on the wearing of glasses or on patching.

Glasses should be kept clean.



## REVIEWING PROGRESS

Regular reviews of each young person's progress in consultation with the young person and their parent/ carer. This will follow the whole school assessment cycle reviewing pupil attainment and progress.







# SEN SUPPORT TARGETED SUPPORT



## ASSESS DESCRIPTION OF NEED

**Some children's vision needs cannot be met by universal approaches over a sustained period of time.**

Some children may have vision impairments identified by medical practitioners.

Vision impairments take many forms and have widely differing implications for educational provision. Many children wear glasses or contact lenses and there will be children who might have limited vision in one eye. They may need certain adaptations to support their access. Staff in settings should follow medical /QTVI advice on patching if the child has a squint.

All visual impaired children require:

- Systems in place to seek information about a child's vision need/concerns so as to identify learning needs

- Systems in place for staff to be able to seek the views of the parents/carers about their child's vision needs
- Appropriate policies for supporting children and young people with vision needs
- Setting to consider the needs of children with a vision loss in their accessibility planning
- Internal assessment and review of all environments to ensure they are low vision friendly
- Whole setting awareness of the implications of a vision loss for a child and for appropriate strategies to ensure the inclusion of children with a vision loss
- Risk assessments in place for educational activities on or off site to include the needs of individual children within the group





There should be consistently followed processes in place for handing over individual child needs at times of transition between settings.

Difficulties may become apparent in the following

- Ability to access the early years curriculum
- Ability to develop self-help strategies
- Social and emotional learning and development

They may have

- Assessed moderate vision loss that cannot be corrected, or be registered sight impaired by an Ophthalmologist
- Acuities between 6/19 and 6/36
- A diagnosed eye condition
- A diagnosis of cerebral vision impairment
- A diagnosis of a degenerative eye condition.

Some children will require:

- Assessments and observations by key staff and SENCO to monitor curriculum access, attainment and ability to participate and engage in activities
- A qualified Teacher of Vision Impairment to undertake specific assessments to determine specific need
- A functional vision assessment conducted in association with medical advice to inform staff on child needs
- Learning and play materials presented in an accessible format
- Liaison and consultation with external agencies
- Adaptations to the setting environment to enable child access and safety





## PLAN AND DO DESCRIPTORS OF PROVISION



### **Some children will require**

- Systems in place to seek information about a child's vision need/concerns so as to identify learning needs
- Systems in place for staff to be able to seek the views of the parents/carers about their child's vision needs
- Appropriate policies for supporting children and young people with vision needs
- Setting to consider the needs of children with a vision loss in their accessibility planning
- Internal assessment and review of all environments to ensure they are low vision friendly
- Whole setting awareness of the implications of a vision loss for a child and for appropriate strategies to ensure the inclusion of children with a vision loss
- Risk assessments in place for educational activities on or off site to include the needs of individual children within the group

There should be consistently followed processes in place for handing over individual child needs at times of transition between settings.

- Assessments and observations by key staff and SENCO to monitor curriculum access, attainment and ability to participate and engage in activities
- A qualified Teacher of Vision Impairment to undertake specific assessments to determine specific need
- A functional vision assessment conducted in association with medical advice to inform staff of the child's needs
- Learning and play materials presented in an accessible format
- Liaison and consultation with external agencies
- Adaptations to the setting environment to enable child access and safety

Some children will require access to the following intervention and support:

- Access to the early years curriculum which has been adapted to meet vision needs- this could be enlarged or tactile resources
- Advice and strategies from a qualified teacher of Visual Impairment
- Assessment, advice and programmes from a habilitation specialist
- Bespoke training from the Visual Impairment team
- Extra time to carry out some activities and tasks





## REVIEWING PROGRESS

**Reviews of progress should take place regularly (e.g. 3 x year).**

Reviews are key to the assessment process and should be fully recorded.

Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met then strategies/resources should be changed or targets broken in to small steps. Achieving targets may also mean that arrangements and targets would be adjusted.

Parents/carers/child's views should always be sought as part of the review process.

Records of steps taken to meet needs of individual children and the impact these steps have had should be kept and available as needed.

Where appropriate reviews should involve input from external professionals.

In analysing progress that has been made the child may

- No longer need SEN provision and their needs may be met from universal approaches
- Continue to need SEN provision
- Need more specialist support





# SEN SUPPORT

## SPECIALIST SUPPORT



## ASSESS DESCRIPTION OF NEED

**A few children's vision needs cannot be met by universal or targeted interventions and support approaches alone. In these cases, their vision difficulties are likely to be long term.**

They may have:

- Significantly reduced vision acuity
- Near vision difficulties above point 36
- Reduced fields of vision
- Other diagnosed eye conditions

These children may require a higher level of adult support/ intervention in order to follow routines and learning or may rely on adapted resources.

They may require a highly personalised approach drawing on additional interventions and support. In the first instance this

should be implemented via the setting's normally available resources. Where the level of need is deemed to be higher than this then the setting should consider a request for additional funding via the EYIF.

A few children's vision needs cannot be met by universal or targeted interventions and support approaches alone. In these cases their difficulties are likely to be long term and may impact significantly on:

- Ability to follow instruction
- Educational progress, achievement of expected levels
- Ability to form friendships or understand social expectations

There will be a need for regular assessments and monitoring.





These children may require a higher level of adult support/intervention in order to follow setting routines and learning or may rely on adapted resources.

They may require a highly personalised approach drawing on additional interventions and support. In the first instance this should be implemented via the setting's normally available resources. Where the level of need is deemed to be higher than this then the setting should consider a request for additional funding via the EYIF.

Some children with a sensory impairment requiring an EHC needs assessment are identified through close liaison with medical services.





## PLAN AND DO DESCRIPTORS OF PROVISION



A few children's vision needs cannot be met by universal or targeted interventions and support approaches alone. In these cases their difficulties are likely to be long term and may impact significantly on:

- Ability to follow instruction
- Educational progress, achievement of expected levels
- Ability to form friendships or understand social expectations

There will be a need for regular assessments and monitoring.

These children may require a higher level of adult support/ intervention in order to follow setting routines and learning or may rely on adapted resources.

They may require a highly personalised approach drawing on additional interventions and support. In the first instance this should be implemented via the setting's normally available resources. Where the level of need is deemed to be higher than this then the setting should consider a request for additional funding via the EYIF.

A few children will require access to the following intervention

and support

- Access to the early years curriculum which has been adapted to meet their vision needs such as pre-Braille activities, tactile and/or enlarged resources
- Regular visits from the Teacher of Vision Impairment, which may include direct teaching of specialist skills
- Access to a quiet area for specialist teaching/rest breaks
- Additional time to carry out tasks with adult support
- Additional support to ensure safe movement around setting





## REVIEWING PROGRESS

### **Reviews of progress should take place regularly (e.g. 3x year).**

Reviews are key to the assessment process and should be fully recorded.

Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met then strategies/resources should be changed or targets broken in to small steps. Achieving targets may also mean that arrangements and targets would be adjusted.

Parents/carers/child's views should always be sought as part of the review process.

Records of steps taken to meet needs of individual children and the impact these steps have had should be kept and available as needed.

Where appropriate reviews should involve input from external professionals.

In analysing progress that has been made the child may

- No longer need such intensive SEN provision and their needs may be met from targeted/ universal approaches.
- Continue to need intensive SEN provision
- Need more intensive personalised support





### 3. MULTI-SENSORY IMPAIRMENT (MSI)

**If you have a child within your setting who meets the criteria set out below and does not yet have a teacher of the Deaf/ Vision Impairment involved, please make a referral to the Sensory and Physical Support Service (SPSS).**

Criteria for involvement:

The child is a resident of Derbyshire and/or attends a Derbyshire setting and has one or more of the following:

- has a vision impairment that is not corrected by glasses
- a diagnosis of cerebral vision impairment
- a hearing loss in both ears of 30dB or more in the better ear
- been prescribed with a hearing aid
- a hearing loss in one ear of 30dB or more, averaged over the mid frequencies
- a high frequency hearing loss of any kind
- a diagnosis of auditory neuropathy

The referral forms for VI and HI specialist teaching support are available on the DCC website and the Derbyshire Local Offer. Please note that parental consent is required for these referrals.

Please refer to the Early Years SEN Descriptors for VI and for Deaf and HI. The descriptors outline local authority expectations about types and levels of support which early years pupils in Derbyshire should receive through school or early years setting SEN support as described in the SEN code of practice.

The Early Years Foundation Stage is a framework for children up to the age of five and specifies requirements for learning and development. Early learning goals summarise the knowledge, skills and understanding that young children should acquire by specific areas. The EYDs set out the provision that settings should make when children need additional support to achieve the EYFS goals.

The SEND code of practice describes a graduated response to meeting the needs of children with SEND, which in early years settings, should be led and coordinated by the setting SENCO. Where despite purposeful action by the setting, a child continues to make little or no progress over a sustained period, practitioners should consider involving appropriate specialists. The decision to involve specialists should be taken with the child's parents. Where, despite a setting having taken relevant and purposeful action to identify, assess and meet the needs of a child, and the child has not made good progress, the SEND code of practice suggests that the setting should consider requesting an Education, Health and Care Needs Assessment.



### **THE SEND CODE OF PRACTICE 2015 SAYS;**

*6:34 Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support.*

### **TERMS OF REFERENCE**

Any reference to early years settings includes

- maintained nursery schools
- maintained nursery classes (as part of an Infant and nursery class or primary school)
- private, voluntary, independent providers

This document is intended for use throughout the Early Years Foundation Stage, that is from FS1 to the end of reception.





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL



### ASSESS DESCRIPTION OF NEED

Most children with a temporary hearing loss or unilateral hearing combined with a vision impairment will have their needs met by universal approaches.

Many children have some degree of hearing loss at some point in their setting years. This may affect one or both ears and may be fluctuating in its nature.

If the hearing loss is temporary and vision is corrected by glasses then it should not be assumed that the young person has SEN.

If you have concerns about a child's hearing and vision please refer to the Early Years SEN descriptors. These can be found on the Derbyshire Local Offer.

If a child requires provision additional to or different from that which is normally available in the settings, then staff should consider whether the child should be identified as having special educational needs and recorded as at SEN support.





## PLAN AND DO DESCRIPTORS OF PROVISION

### All children will require access to the following Intervention and Support

- Access to a suitable vision/auditory acoustic and learning environment
- Early Years curriculum intervention that takes account of individual needs
- Personalised learning goals
- Strategies that promote independence but also supported learning
- Glasses should be kept clean.



## REVIEWING PROGRESS

Regular reviews of each young person's progress in consultation with the young person and their parent/ carer. This will follow the wholeschool assessment cycle reviewing pupil attainment and progress.





# SEN SUPPORT TARGETED SUPPORT



## ASSESS DESCRIPTION OF NEED

**Children with a multi-sensory impairment have a combination of vision and hearing difficulties. The combination of needs can have a very significant impact on a child's ability to access the curriculum and the social context of a setting. Need and provision will be unique to each individual.**

Some children may have both a vision impairment and a hearing impairment identified by medical practitioners. Vision and hearing impairments take many forms and have widely differing implications for educational provision. Many children wear glasses or contact lenses and there will be children who might have limited vision in one eye. They may need certain adaptations to support their access.

Many children have some degree of hearing loss at some point in their setting years. This may affect one or both ears and may be fluctuating in its nature.

All children require:

- Systems in place to seek information about a child's multi-sensory needs/ concerns so as to identify learning needs
- Systems in place for staff to be able to seek the views of the parents/carers about their child's multi-sensory needs
- Appropriate whole setting policies for supporting children and young people with multi-sensory needs
- Setting to consider the needs of children with a multi-sensory need in their accessibility planning
- Internal assessment and review of all setting environments to ensure they are acoustically friendly
- Whole setting awareness of the implications of a multi-sensory impairment for a child and for appropriate strategies to ensure inclusion





- Risk assessments in place for educational activities on or off site to include the needs of individual children within the group

Difficulties may become apparent in the following:

- Ability to access the early years curriculum
- Ability to develop receptive and expressive communication skills
- Ability to develop self-help strategies
- Social and emotional learning and development

The child may have:

- Assessed vision loss that cannot be corrected, reducing near or distance vision
- A diagnosed hearing loss

Some children's multi-sensory needs cannot be met by universal approaches over a sustained period of time. Some children will require:

- Assessments and observations by key staff and SENCO to monitor early years curriculum access, attainment and ability to participate and engage in activities

- A specialist teacher to undertake specific assessments to determine specific need
- Functional vision and hearing assessment conducted in association with medical advice to inform staff on child's needs
- Learning materials and approaches presented in an accessible format
- Liaison and consultation with external agencies
- Adaptations to the setting environment to enable child access and safety

If a child requires provision additional to or different from that which is normally available in the mainstream setting, then staff should consider whether the child should be identified as having special educational needs and recorded as at SEN support.

Where the level of need is deemed to be higher than this then the setting should consider a request for additional funding via the EYIF.

There should be consistently followed processes in place for handing over individual child needs at times of transition between settings and staff.





## PLAN AND DO DESCRIPTORS OF PROVISION

### **Some children will require access to the following Intervention and Support:**

- Hearing aids checked that they are working. Staff in settings should follow medical advice on the wearing of glasses/ hearing aids
- Access to the early years curriculum which has been adapted to meet their multi-sensory needs - possibly including enlarged or tactile resources
- Advice and strategies from the appropriate qualified specialist teachers
- Assessment, advice and programmes from a habilitation specialist
- Bespoke training from the HI and VI teams
- Extra time to carry out some activities and tasks





## REVIEWING PROGRESS

**Reviews of progress should take place regularly (e.g. 3x year).**

Reviews are key to the assessment process and should be fully recorded.

Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met then strategies/resources should be changed or targets broken in to small steps. Achieving targets may also mean that arrangements and targets would be adjusted.

Parents/carers /child's views should always be sought as part of the review process.

Records of steps taken to meet needs of individual children and the impact these steps have had should be kept and available as needed.

Where appropriate reviews should involve input from external professionals.

In analysing progress that has been made the child may:

- No longer need SEN provision and their needs may be met from universal approaches
- Continue to need SEN provision
- Need more personalised support







# SEN SUPPORT

## SPECIALIST SUPPORT



### ASSESS DESCRIPTION OF NEED

A few children's multi-sensory needs cannot be met by universal or targeted interventions and support approaches alone. In these cases, their combined vision and hearing difficulties are likely to be long term.

These children may require a higher level of adult support/ intervention in order to follow setting routines and learning or may rely on adapted resources.

They may require a highly personalised approach drawing on additional interventions and support. Where the level of need is deemed to be higher than this then the setting should consider a request for additional funding via the EYIF.

Some children with multi-sensory impairment requiring an EHC needs assessment are identified through close liaison with medical services.





## PLAN AND DO DESCRIPTORS OF PROVISION

### **A few children will require access to the following Intervention and Support:**

- Access to the early years curriculum which has been adapted to meet their multi-sensory needs
- Regular visits from specialist teachers
- Access to a quiet area for specialist teaching/rest breaks
- Additional time to carry out tasks with adult support
- Additional support to ensure safe movement around setting



## REVIEWING PROGRESS

### **Reviews of progress should take place regularly (eg 3x year).**

Reviews are key to the assessment process and should be fully recorded.

Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met then strategies/resources should be changed or targets broken in to small steps. Achieving targets may also mean that arrangements and targets would be adjusted.

Parents/carers/child's views should always be sought as part of the review process.

Records of steps taken to meet needs of individual children and the impact these steps have had should be kept and available as needed.

Where appropriate reviews should involve input from external professionals.

In analysing progress that has been made the child may:

- No longer need such intensive SEN provision and their needs may be met from targeted approaches
- Continue to need intensive SEN provision
- Need more intensive personalised support



## 4. PHYSICAL AND/OR MEDICAL NEEDS

### **THE SEND CODE OF PRACTICE 2015 SAYS;**

*6.35 Some children and young people with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available to their peers.*

### **TERMS OF REFERENCE**

Any reference to early years settings includes

- maintained nursery schools
- maintained nursery classes (as part of an Infant and nursery class or primary school)
- Reception classes in a primary school
- private, voluntary, independent providers

This document is intended for use throughout the Early Years Foundation Stage (EYFS), including from nursery to the end of reception\*.





# WHOLE SETTING

## QUALITY FIRST TEACHING/UNIVERSAL



## ASSESS DESCRIPTION OF NEED

**Many children with a physical need will have their needs met by universal approaches.**

Physical and medical needs are wide and varied and the impact on education can sometimes be managed with minimal and short-term intervention.

If the physical need is temporary and only needs short-term support, it should not be assumed that the child has SEN.

Some pupils may have physical impairments identified by medical practitioners. Physical impairments take many forms and have widely differing implications for educational provision. Certain adaptations may be needed to support access to learning and social opportunities, but this does not in itself represent a special educational need.

All children require

- Systems in place for staff to be able to seek the views of the parents/carers about their child's physical needs
- Appropriate policies for supporting children with physical needs
- Setting to consider children with a physical need in their accessibility planning
- Internal assessment and review of all environments to ensure they are wheelchair friendly and accessible to children with physical needs
- Whole setting awareness of the implications of a physical impairment for a child and for appropriate strategies to ensure the inclusion of children with a physical need
- Risk assessments in place for educational activities on or off site to include the needs of individual children within the group





There should be consistently followed processes in place for handing over individual child needs at times of transition between settings or staff in different environments.

If you have concerns about a child's physical development, please refer to the Early Years SEN Descriptors - Physical Impairment section. The EYSEN descriptors can be found on the Derbyshire Local Offer.



## PLAN AND DO DESCRIPTORS OF PROVISION

All children will require access to

- A suitable accessible physical and learning environment
- Differentiated curriculum considering individual needs
- Personalised learning goals
- Grouping strategies that promote independence but also supported learning
- Access to age appropriate ICT i.e. switch/Big Mack





## REVIEWING PROGRESS

Regular reviews of each child's progress in consultation with the child's parent/carer. This will follow the whole-setting assessment cycle reviewing child attainment and progress.





# SEN SUPPORT

## TARGETED SUPPORT



## ASSESS DESCRIPTION OF NEED

**Some children's physical needs cannot be met by universal approaches over a sustained period of time.**

Difficulties may arise from

- Physical, neurological or other causes, e.g. cerebral palsy
- Severe trauma, such as accident or illness
- Degenerative conditions such as muscular dystrophy

Some children may require the following measures:

- Assessment and observation by a SPSS-PI Teacher to provide guidance on management strategies, access to the curriculum and layout of environment
- Adaptations to access buildings, equipment and activities
- Adaptations to access the early years curriculum
- Support to develop self-help strategies

- Support with social and emotional learning and development
- Support with independence in daily living skills
- Time out to rest in a quiet area

If a child requires provision additional to or different from that which is normally available in the setting, then staff should consider whether the child should be identified as having special educational needs recorded as requiring SEN support.

The Sensory and Physical Support Service (Physical Impairment) can offer support at this stage. SPSS-PI can advise schools and parents regarding the implications of the child/young person's physical impairment.



Referral forms and additional information about the Physical Support Service can be found here on the Derbyshire Local Offer and DCC website. Please note that parental consent is required for these referrals.

Some children will require:

- Assessments and observations by key staff and SENCO to monitor early years curriculum access, attainment and ability to participate and engage in activities
- A specialist teacher to undertake specific assessments to determine specific need
- Functional and accessibility assessments conducted in association with medical advice to inform staff on child's needs
- Learning materials and approaches adapted to ensure access
- Liaison and consultation with external agencies
- Adaptations to the setting environment to enable child access and safety

Where the level of need is deemed to be higher than can be met by normally available resources, then the setting should consider a request for additional funding.



## PLAN AND DO DESCRIPTORS OF PROVISION

In addition to universal provision, some children will require:

- Access to the early years curriculum which has been adapted to meet physical needs - this could be electronic, use of alternative augmented communication methods, specialist seating, height adjustable tables etc.
- Regular involvement from specialist PI teacher for support, advice, training and assessment as appropriate
- Specific targeted interventions assessment, advice and programmes from a physiotherapist, occupational therapist, moving and handling advisor and specialist teacher as appropriate
- Extra time to carry out some activities and tasks
- Access to a quiet area for specialist teaching and rest breaks







## REVIEWING PROGRESS

**Reviews of progress should take place regularly (e.g. 3 x year).**

Reviews are key to the assessment process and should be fully recorded.

Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, then strategies/resources should be changed, or targets broken into small steps. Achieving targets may also mean that arrangements and targets would be adjusted.

Parents/carers/child views should always be sought as part of the review process.

Records of steps taken to meet needs of individual children and the impact these steps have had should be kept and available as needed.

Where appropriate, reviews should involve input from external professionals.

In analysing progress that has been made the child may:

- No longer need SEN provision and their needs may be met from universal approaches
- Continue to need SEN provision
- Need more specialist support





# SEN SUPPORT

## SPECIALIST SUPPORT



## ASSESS DESCRIPTION OF NEED

**A few children's physical needs cannot be met by universal or targeted interventions and support approaches alone.**

In addition to the measures implemented in universal and targeted levels of support, their difficulties are likely to be long term and may impact significantly on

- Ability to carry out routine classroom tasks
- Educational progress, achievement of expected levels
- Ability to form friendships or understand social expectations
- Ability to access the learning environment independently
- Ability to manage their own personal care

These children may require a higher level of adult support/ intervention in order to follow routines and learning or may rely on adapted resources.

They may require a highly personalised approach drawing on additional interventions and support.

Where the level of need is deemed to be higher than this then the setting should consider a request for additional funding via EYIF/GRIP.

They may require a personalised approach which draws on very detailed interventions and support involving ongoing monitoring of appropriate specialist professionals. If a child, despite graduated cycles of assess, plan, do and review, does not make progress, consideration may need to be given to the appropriateness of requesting an EHC needs assessment. Most children with significant physical impairment requiring an EHC needs assessment are identified through close liaison with medical services.

The child may have a requirement for frequent assessments and monitoring of needs which could include a multi-disciplinary approach.





## PLAN AND DO DESCRIPTORS OF PROVISION

### **In addition to the intervention and support approaches put in place at the universal and targeted level a few children may require**

- Access to the environment which may include building adaptations to the site i.e. accessible toilet, decluttering of walkways
- Regular and ongoing postural management throughout the school day (position changes, change of seating/equipment)
- Medication/feeding needs
- Intimate care
- Person specific moving and handling plan/evacuation plan
- Out of school activities including transport arrangements
- Regular visits from specialist teachers
- Increased access to a quiet area to carry out specialist programmes and children's rest breaks
- Additional time to carry out tasks with adult support
- Additional support to ensure safe movement around setting
- Ensuring choice making is child led where possible in the free flow classroom this is of particular importance to children that are not independently mobile.
- Adapted or specialist outdoor toys
- Support and intervention to develop social skills
- Regular checking of specialist equipment





## REVIEWING PROGRESS

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Reviews are key to the assessment process and should be fully recorded.

Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, then strategies/resources should be changed, or targets broken into small steps. Achieving targets may also mean that arrangements and targets would be adjusted.

Parents/carers/child views should always be sought as part of the review process.

Records of steps taken to meet needs of individual children and the impact these steps have had should be kept and available as needed.

Where appropriate, reviews should involve input from external professionals.

In analysing progress that has been made the child may:

- No longer need such intensive SEN provision and their needs may be met from universal approaches
- Continue to need intensive SEN provision
- Need more intensive specialist support



# GLOSSARY

**ACEs** - Adverse Childhood Experiences

**ADHD** - Attention Deficit Hyperactivity Disorder

**BSL** - British Sign Language

**CoP** – Code of Practice

**CVI** - Cerebral Vision Impairment

**EHA** - Early Help Assessment

**EHCNA** - Education, Health and Care Needs Assessment

**HI** - Hearing Impairment

**ICT** - Information and Communications Technology

**LVA**s - Low Vision Aids

**MFL** – Modern Foreign Languages

**MLD** - Moderate Learning Difficulties

**MSI** - Multi-Sensory Impairment

**OT** – Occupational Therapy

**PE** – Physical Education

**PECS** - Picture Exchange Communication System

**PfA**- Preparation for Adulthood

**PI** – Physical Impairment

**PMLD** – Profound and Multiple Learning Disability

**PSHE** – Personal, Social, Health Education

**QFT** - Quality First Teaching

**QTVI** – Qualified Teacher of Vision Impairment

**SDQ** - Strengths and Difficulties Questionnaire

**SEMH** - Social, Emotional and Mental Health

**SENCO** – Special Educational Needs Co-ordinator

**SEND** – Special Educational Needs and Disability

**SLCN** – Speech, Language and Communication Needs

**SLD** – Severe Learning difficulties CPD -  
Continuing Professional Development

**SLT** – Senior Leadership Team

**SSE** - Sign Supported English

**TA** – Teaching Assistant

**VI** - Vision Impairment

